

Holiday Request Form

Name: _____

Date: _____

Holiday Entitlement – April 2014 to March 2015

Department/Shop Location: _____

About this holiday please tick day's to be taken and cross non working day's

First date of holiday: _____

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Last date of holiday: _____

Total Number of holiday days taken: _____

Date due back to work _____

About previous holiday

Please answer the questions below.

Total number of days/ hours booked or taken so far _____

Total number of days/ hours left after this holiday _____

Authorisation

Signed by the person making this request _____

Print name

Authorised by the Line Manager _____

Print name

Actioned by Payroll: Signature _____ Date _____

Please note:

*You must give 14 working days notice before the requested date.
Holiday must be taken as days off and cannot be taken as money.
Holiday cannot be carried over into the following year.*

Please keep a copy for your records.