

ANNUAL LEAVE REQUEST FORM

CARERS NAME:

Any Staff requesting Annual Leave must ensure that they give a minimum of <u>TWO</u> weeks Notice. This enables the office staff to plan rotas and determine whether there will be sufficient staff working to cover your work. We will try to accommodate all holidays requested, however there may be times where this may not be possible.

DATE:

Annual Leave Dates Required	
DATE FROM:	TIME:
DATE TO:	TIME:
TOTAL OF DAYS REQUIRED	
Office Use Only Accepted/Declined by	
Text Message Sent/Phone call made by Date	
Notes:	