

Holiday Request Form

Employee Name:	Pay Ref. No.:
Holiday Year:	Department:
Holiday Entitlement for full year..... days.	Holiday Entitlement in current year.....days.

For Completion By Employee			For Completion by manager / supervisor				
From - To	No of Days	Signed & Date of Request	Holiday Approved Initial & Date	Holiday Refused Initial & Date*	If Approved		
					Days Taken	Days Remaining	Staffing calendar updated

*Reason for Holiday Refusal	
Date:	Reason:

For Office Use

Absence card completed (Tick/Date /Initial)																			
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'I agree to this information being retained for employment purposes under the General Data Protection Regulations 2018'. Signed.....Date:.....