Leave Application



Send completed form via email rmetcalfe@rjmprogramming.com.au

Phone: (02) 95183479

Applicant's	Details		
		_	

Surname:	Metcalfe					
Other names:	Robert Jame	es :			Staff no.: 1	
Classification:	Analyst/Progra	ammer				
Work location:	Newtown	<u> </u>				
Leave Applied For						
Whole Days: Provide Part Days: Provide Part Day which spa	the leave dates	and the leav			o times before and after lunch.	
Service Control of the Control of th			For part days only		N. C.III.	Supporting
Leave Type	First Date	Last Date	Leave Start Time 24 Hr Time	Leave Stop Time 24 Hr Time	Nature of Illness or Reason for Absence (Required only Sick Leave, Family Leave or Special Leave)	documents attached (tick box)
Sick	29/2/2019	29/2/2019			Worth a try!	
• .						
	-					
	payment of annua				reation leave. Tree weeks before the date on which paym	uppt is required)
	payment in advar		st be lorwarded	nocrater triair ti	(The last pay day prior to commend	
of salary due to me fo		-				······
Applicant Declarat	tion	· .				
l declare that the inform	0 M	his form is true a	nd complete.		Date: 29/2/ 2	2019
Remarks:	Time in lieu					
	ral ·					
	e application is co	rrect and comp				
Trial Version			Name (prir	nt):		
Date:	<u> </u>		Position:			