

Annual Leave Application Form



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For Enquiries Call: (07) 3806 1120

Section A: My Details

My full name is: _____

My host employer is: _____

My ID number is:

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Payroll can contact me on: _____

My trade is: _____

My year of trade is (tick):

1st	2nd	3rd	4th	Other

Section B: Annual Leave Details

First day of annual leave is: Date: ____/____/____

Last day of annual leave is: Date: ____/____/____

First day back at work is: Date: ____/____/____

Reason for annual leave (must be completed): _____

Annual leave is paid weekly. If it is more than 5 days and you would like it in a lump sum, please advise in reason above.

Section C: Employee Declaration

I acknowledge that if I have insufficient annual leave the remaining balance will be treated as leave without pay. Also, if I use my annual leave now and have insufficient annual leave for any future dates, it will be treated as leave without pay.

Employee signature: _____ Date: ____ / ____ / ____

Section D: Host Employer Authorisation

As the authorised host employer / supervisor, I agree to the annual leave dates requested by the apprentice / trainee.

Name of authoriser: _____ Signature: _____ Date: ____ / ____ / ____

Section E: Office Use Only

Administration	Field officer: Number of annual leave days requested:Year change / Completion Date:/...../..... Number of annual leave days available: Annual leave booked: Yes / No Date:/...../..... to/...../..... College booked: Yes / No Date:/...../..... to/...../..... Comments:
Field Officer	Does the employee require annual leave at Christmas: Yes / No Date:/...../..... to/...../..... Approved / Declined Reason / Comments: Apprentice to be advised by: Field Officer / Administration Date:/...../..... Time: : All Trades Queensland authorising signature: Date:/...../.....