

<b>Change to previously registered holiday or special holiday</b>	
<b>Name:</b>	
<b>CPR:</b>	
<b>Which holidays should be cancelled:</b>	Dates of <b>registered holidays</b> which should be <b>cancelled</b> : From: _____ To: _____
<b>Which special holidays should be cancelled:</b>	Dates of <b>registered special holidays</b> which should be <b>cancelled</b> : From: _____ To: _____
Instead I will have:	<b>Holiday</b> Number of days: _____ Date for first day of holiday: _____ Date for last day of holiday: _____
Instead I will have:	<b>Special holiday</b> Numbers of days: _____ Date for first day of special holiday: _____ Date for last day of special holiday: _____
Date: _____	Date: _____
Employee's signature:  _____	Signature Head of the Group:  _____
<b>The signed form should be given to <i>Ann-Berit Stærkær</i> for registration.</b>	