



Employee Name: _____

Staff ID No:

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Discipline/School/Unit: _____

Annual Leave:

A/L Entitlement for 2020

+ A/L Carried Forward

= Total A/L Available

Approved to be carried forward by _____ Date _____
Line Manager

(Up to 5 days may be carried forward by prior agreement with your line manager)

| Start Date | No. of Days | Balance available | Signed/Approved by Line Manager | Date Approved |
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| Start Date | No. of Days | Balance available | Signed/Approved by Line Manager | Date Approved |
|------------|-------------|-------------------|---------------------------------|---------------|
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Sick Leave: A maximum of 7 days in a rolling two year period may be taken as non-certified sick leave. All sick leave absences greater than this must be certified.

| Date From | Date To | No. of Days | Cert. | Non-Cert. | Reason given | Signed/Approved by Line Manager | Date |
|-----------|---------|-------------|-------|-----------|--------------|---------------------------------|------|
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Force Majeure, Compassionate & Paternity Leave: See the relevant policies on the HR section of the University Website for details.

| Date From | Date To | No. of Days | Type of Leave & Relevant Details | Signed/Approved by Line Manager | Date |
|-----------|---------|-------------|----------------------------------|---------------------------------|------|
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