

Holt Doctors Limited

4th Floor, 1 Belle Vue Square, Broughton Road, Skipton, BD23 1FJ

Employee Holiday Request Form (Days)

Employee Details

Title	Forename	Surname	Employee Number
Mrs	Amanda	Binks	114

Holiday Year: 01/01/2020 - 31/12/2020

Holiday Summary

Entitlem (Days	 Allocated (Days)	Unallocated (Days)	Time in Lieu Available (Days)	Can Use Next Years Entitlement this Year?			No	Can Carry Over Unused Holidays to Next Year?
22.5	0	22.5	0	Maximum Days:	N/A	Used To Date:	N/A	No

Authorised Holidays

Prev	ious 10 Holidays 1	Taken As at Date	e: 10/06/201	10/06/2019Next 10 Holidays Booked				
Holiday Start Date	Holiday End Date	Entitlement Used this Holiday Year		oliday t Date	Holiday End Date	Entitlement Used this Holiday Year		
27/05/2019	27/05/2019		05/0	8/2019	20/08/2019)		
13/05/2019	16/05/2019		26/0	8/2019	26/08/2019)		
06/05/2019	06/05/2019		25/1	2/2019	25/12/2019)		
22/04/2019	22/04/2019		26/1	2/2019	26/12/2019)		
19/04/2019	19/04/2019							
23/01/2019	23/01/2019							
02/01/2019	03/01/2019							
01/01/2019	01/01/2019							
27/12/2018	31/12/2018							
26/12/2018	26/12/2018							

Holiday Request Details

Enter the Holiday Start and End Dates then select if the start and end dates are a full or half day. If the holiday spans only a single day (half or full day): 1) Enter the Holiday Start Date 2) Select Half Day 3) Select if it is an AM or PM Half Day. Leave the Last Date of Holiday blank.

Holiday Start Date (dd/mm/yyyy)					
18/05/2020					
Starts as Half Day or is a Half Day Holiday:	Full Day	Single Half Day (am or pm) AM			

Last Date of Holiday (leave blank if single day) (dd/mm/yyyy)				
21/05/2020				
Holiday Ends as Half or Full Day:	Full Day			

Total Amount of Leave Required

Optional: Enter the total amount of Days or Hours required for this holiday: (This is figure is for reference purposes only and is ignored when importing into HRM)	4
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Time in Lieu

If you have Time in Lieu available and would like to use it for this holiday, enter the amount	
you would like to use against this holiday:	

Days

Notes to Manager

The following section is for you to enter any notes relating to the holiday request:

Employee Signature If required, I confirm that I have checked that colleagues are not also absent on these dates and that they are available.

Amanda Bnks

Authorised By

Tracy Ward

Ver: HRFd01.20