

Holiday Request Form

Date _____

Employee Name _____

Start date	End date	Total Hours	Reason Code

Reason codes: _____

H	Holiday allowance
T	TOIL
BHP	Bank Holiday Paid
S	Sick allowance
SSP	Statutory Sick Pay
PLP	Personal leave Paid
PLU	Personal leave Unpaid

Summary (Hours)	Holiday	TOIL
Allowance c/f		
Plus TOIL Accrued		
Less Allowance approved		
Allowance balance c/f		

Employee signature

Date

Manager signature

Date