



NON-ATTENDANCE SHEET

NOTE:

TO BE USED FOR THE FOLLOWING:

1. All Annual leave –at least 4 weeks notice required
2. Sick Leave-attach *Doctors Certificate*
3. Special Leave-e.g. Funerals, Weddings
4. Time in lieu of hours worked

ALL ABSENCES OF STAFF TO BE RECORDED

Name _____

Absent From _____ To _____

Reason(s) for leave:

IF ON ANNUAL LEAVE DO YOU REQUIRE PAY IN ADVANCE: YES NO

Signed P.A. _____ Date _____

Signed Leader _____ Date _____

(P.A AND THEIR LEADER HAVE TO AGREE ON ANNUAL AND SPECIAL LEAVE)

Official Use

Received On: Date _____

Leave granted yes _____ no _____

Comments: _____

Signature: _____