

# Holiday Request



Cream Health & Social Care Workers

Name: \_\_\_\_\_

**Remember - you have to give twice the number of working days notice as the number of days holiday you wish to take.**

**You received full detail on calculation and payment of holiday pay when you first came to our offices.**

**You must submit a holiday request for any paid annual leave, including bank holidays.**

### Holidays requested:

Date from	Date to	Total number of days requested

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Internal Use

Date received in branch	Date client informed	Sent to payroll by