

The Midcounties Co-operative

Banking Annual Leave Request Form

Colleague Name:	Payroll No:
Leave Year:	Line Manager:
Location:	

This form should be used only for banked leave requests, as per the Banking Annual Leave Policy.

Please complete this form, indicating how many days are requesting to be banked from the year's entitlement. The form should be signed by the colleague and line manager and then forwarded to the Deputy Group General Manager – Personnel Services. Please ensure that a record is kept by the colleague and line manager.

No of Hrs/days Requested	Date of Request	Signed: Colleague	Signed: Line Manager	Received in PSG	Signed: DGGM - PSG	Dates taken

Policy name:	Banking Annual Leave Request Form	Date of last review:	March 2017
Policy owner:	PSG	Issue number:	PSG-SK-001