



SUPPORT WORKER NOTIFICATION OF LEAVE OF ABSENCE

(Please print details clearly)

To the Client Administration Officer

I, (Name) _____

Hereby notify you that I will be absent on:

(Please indicate which type of leave you are taking)

Recreation Leave

Long Service Leave

*Note: If you will be absent on Parental or Long Service Leave,
please refer to the appropriate Policy*

First Day of Leave: ____/____/____

Last Day of Leave: ____/____/____

Signed: _____

Date: ____/____/____

OFFICE USE ONLY

- | | | |
|-------------------------------------|--|---------------------------------|
| CLIENT
ADMIN
OFFICER | <input type="checkbox"/> Entered into Carelink+ Notes | Date ____/____/____ Intl: _____ |
| | <input type="checkbox"/> Email to:
Human Resources, HomeCare+ and Payroll | Date ____/____/____ Intl: _____ |
| | <input type="checkbox"/> Removal of Leave Dates | Date ____/____/____ Intl: _____ |
| | <input type="checkbox"/> Scanned Copy to Personnel File | Date ____/____/____ Intl: _____ |