

Holiday/Annual Leave Form

Phone: 1300 881 279 Fax: 1800 819 252
161 Hammond Avenue, Wagga Wagga, NSW 2650
E-Mail: timesheets@gtes.com.au Web: www.gtes.com.au

Name: _____
Home Address: _____
City /Postcode: _____
Phone Number: _____
Host: _____

Holiday/Leave Period

First Day Off Work: ___ / ___ / ___

Last Day Off Work: ___ / ___ / ___

First Day Back at Work : ___ / ___ / ___

Will you be missing any TAFE? _____

All leave taken will use Annual Leave first unless RDO or other leave is written in the 'Notes' below

NOTES: _____

Host Signature: _____ **Date:** ___ / ___ / ___

Apprentice Signature: _____ **Date:** ___ / ___ / ___