

Holiday Request Form

Name:	
Company/ Campaign:	
Job Title:	
Number of days requested:	
Holiday Date From:	
Holiday Date To:	

Signature (Temporary Worker)

Signed:..... **Date:**.....

Print name

Please note all holiday request forms must be submitted in line with the temporary staff hand book.

Authorised by Account Manager	Yes/ No Reason if no:
Authorised by WFM:	Yes/ No Reason if no:

Signature (Account Manager)

Signed:..... **Date:**.....

Print name