



Request for leave

1. APPLICANT INFORMATION

FULL NAME:

Arita Walker

DEPARTMENT:

Enhanced Learning
Teaching Assistant

ROLE:

CAMPUS:

Saint Kentigern College

2. LEAVE INFORMATION

LEAVE TYPE	START DATE	END DATE	TOTAL DAYS LEAVE
Annual leave			
Vacation leave			
Sick leave			
Bereavement leave			
Jury leave	30/7/25	30/7/25	1 Day.
Unpaid leave			
Self-isolation			

This can only be approved by a member of SLT

3. AUTHORISATION

Requested by

(Signature of Applicant)

Dated

28/7/25

Approved by

(Line Manager with delegated authority to approve)

Dated

28/7/25

4. NEXT STEP

- Non-Teaching Staff**

Once your manager has approved your leave, please email the form to Payroll@Saintkentigern.com and the Campus Operations Manager for processing.

- Teaching Staff**

Once your manager has approved your leave, please email the form to Payroll@Saintkentigern.com and the Teacher in charge of Relief for processing.