



Application for Time-off for Public Duties

Surname: _____

Forenames: _____

Home Address: _____

_____ Post Code: _____

Team: _____

Place of Work: _____

Request for time off for : (Please state reason and/or organisation of which you are a member)	
1.	2.
3.	4.
Amount of time off being requested: (Please indicate for each organisation if more than one involved and give some indication of likely frequency)	
1.	2.
3.	4.
Have you been granted time off for trade union duties including safety representatives? YES/NO	
If Yes give details including amount of time off:	
Any additional information in support of your application:	
Signed:	Date:
Application Received:	
Manager's Comments:	

Manager's Decision:	
Signed / Print Name:	Date: