**CITY HOME HELPERS - ANNUAL LEAVE CALCULATION REQUEST**

|  |  |
| --- | --- |
| NAME |  |
| JOB TITLE |  |
| PAYROLL NUMBER (if known) |  |
|  |
| **NEW STARTS** |
| START DATE |  |
| WORKING HOURS PER WEEK |  |
|  |
| **EXISTING EMPLOYEES REVISED HOURS** |
| OLD WORKING HOURS PER WEEK |  |
| NEW WORKING HOURS PER WEEK |  |
| DATE OF REVISION IN HOURS |  |

…………………………………………………………………………………………………………………………………………………………….

**For Completion in HRSSC**

**ANNUAL LEAVE CALCULATION**

**Calculation completed by: < Name>**

**Date calculation completed:**