

DIOCESE OF NEWCASTLE
LONG SERVICE LEAVE APPLICATION FORM

I, _____ [full name]

of _____ [Parish]

make application to take a _____ period of long service leave
[weeks]
commencing on _____

Date of commencement of service: _____

Date of any previous period during which long service leave was taken:

Alternate dates on which leave could be taken if the original date is unavailable:

Indicate whether the Rectory will be available for use of relief: _____

If the Rectory will be unavailable for the relief, indicate whether it will be occupied for the whole or part of the time and by whom: _____

The name and address of any locum tenens you wish to submit for approval:

Has your parish agreed to supply rent-free accommodation for your relief? _____

What car allowance is received? _____

I do/do not wish to Salary Sacrifice the Sabbatical Allowance as per the attached CPA4a Salary Sacrifice Disbursement (obtain from payroll)

<p>..... Applicant's Signature</p> <p>Date:</p>	<p>Approved by the Bishop:</p> <p>.....</p> <p>Date:</p>
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