



## HOLIDAY CLAIM FORM

(Please see below for guidelines)

Employee Name (Print): _____			
Address: _____			
Holiday Date:			
From:	To:	No. of Weeks:	Comments:
Employee's Signature: _____			Date: _____

### Example

Holiday Date:			
From:	To:	No. of Weeks:	Comments:
<i>16<sup>th</sup> April 07</i>	<i>20<sup>th</sup> April 07</i>	<i>1</i>	<i>Back at work on the Monday 23<sup>rd</sup> April</i>
<i>2<sup>nd</sup> July 07</i>	<i>13<sup>th</sup> July 07</i>	<i>2</i>	<i>Back at work on the Monday 16<sup>th</sup> July</i>
<i>17/12/07</i>	<i>21/12/07</i>	<i>1</i>	<i>Back at work on the Mon 24<sup>th</sup> December</i>

Employees are entitled to 4 working weeks in a year not including the public holidays listed below (subject to full year employment),

#### STATUTORY HOLIDAY CLAIM FORM GUIDELINES

- New Year's Day (1 January)
- St. Patrick's Day (17 March)
- Easter Monday
- First Monday in May, June, August
- Last Monday in October
- Christmas Day (25 December)
- St. Stephen's Day (26 December)

An employee who is required to work on a statutory holiday, shall at his/her option

- A paid day off within a month of the public holiday
- An additional day of annual leave
- An additional day's pay
- The nearest church holiday to the public holiday as a paid day off