



APPLICATION FOR HOLIDAY PAY

Your Consultant's Name: _____

Name: _____

Branch: _____

Date/s Taken: _____

Annual leave must be approved prior to taking it.
Please indicate where applicable:

- I wish to remain available for temporary employment with Madison Recruitment and would like to apply for the following:
 - I wish to apply for ____ day/s annual leave
 - I wish to apply for ____ alternative day/s that are owing to me

- I wish to discontinue my employment with Madison Recruitment and receive all outstanding accrued holiday pay and alternate days

Signature of Applicant: _____

Signature of Consultant: _____

Return to Madison Recruitment by Fax or Mail to:

Auckland	(09) 303 4452	PO Box 105 675, Auckland 1143
Auckland South East	(09) 274 3901	PO Box 259 253, Botany 2163
Waikato	(07) 839 5662	PO Box 19382, Hamilton 3244
Wellington	(04) 499 8066	PO Box 3357, Wellington 6140
Christchurch	(03) 366 6221	PO Box 2044, Christchurch 8140