carlton
RECRUITMENT

TEMPORARY HOLIDAY REQUEST FORM

(TO BE SUBMITTED AT LEAST ONE WEEK IN ADVANCED)

TEMPS NAME: _____

HOLIDAY DATES REQUESTED

FROM: _____ TO: _____
(1st day not working or   (1st day back at work or
unavailable for work)   available to work)

THEREFORE TOTAL OF NUMBER OF WORKING DAYS (MON -FRI)

REQUESTED: _____

COMPANY YOU ARE TEMPING AT
(IF APPLICABLE) _____

IF SO

DO THEY KNOW?   YES/NO (delete as applicable)
DO THEY NEED COVER?   YES/NO (delete as applicable)

SIGNATURE: _____

DATE: _____