

Refer to the [annual leave](#) provisions before completing this form.

You are advised to seek detailed financial advice about the proposed payment before completing and submitting your application.

**PERSONAL DETAILS**

Name: ..... Staff ID: .....

Work unit: ..... Phone: .....

Amount of annual leave to be taken as a cash payment: ..... working days.

*Minimum payment is for 10 days annual leave, leaving a minimum balance of 20 days.*

**DECLARATION**

I am aware that the portion of leave cashed out will be taxed at my marginal rate and included on my Taxation Payment Summary in the gross earnings for the year in which it is paid.

Signature: ..... Date: .....

**Apply**

**ELIGIBILITY AND APPROVAL (HR Services use only)**
**Eligibility assessment:**

Current annual leave balance: ..... days

Leave to be cashed out: ..... days

Remaining balance: ..... days *(20 day minimum required)*

Leave taken in preceding 12 months: ..... days *(must be equivalent to days being cashed out)*

Details of previous requests to cash annual leave: .....

**Eligibility confirmed:**       Yes       No

HR Officer/Assistant ..... Date: .....

Payment approved:  
Director, Human Resources ..... Date: .....

**OFFICE USE ONLY**

Entered: ..... Date: ..... Checked: ..... Date: .....

Email Employee & Head Of Work Unit: ..... Date: .....