

# STAFF ABSENCE REPORTING FORM

(Not required for Statutory Bank Holidays)

Every staff member is required to complete and submit this form to the office on the day they return to work from a period of sick leave, or for an absence from work that was taken without prior notice and agreement with management.

Employee's Name: .....  
Please print

**Please tick the reason for your absence:**

- 1. Absence requested to be taken as paid holiday (at management's discretion)  (✓)  (✓)
- 2. Unpaid leave:
- 3. Sick leave (up to 7 days): <sup>Note 1</sup>  (✓)
- 4. Sick leave (more than 7 days): <sup>Note 1</sup>  Doctor's certificate attached:
- 5. Compassionate leave:
- 6. Absence for part of working day:  Time left work: ..... am/pm  
Returned to work at: ..... am/pm

Please briefly state the reason for your absence:

.....

Date absence started: .....

Date returned to work: .....

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

**Note 1:** You are only required to provide us with a doctor's certificate for periods of absence for health reasons that last for more than seven consecutive days, including Saturday and Sunday. Attach the certificate to this form.

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