



IN-SERVICE LEAVE APPLICATION

1. EMPLOYEE DETAILS (to be completed by employee)	
LSL number	Date of birth
Surname	First name
Email	Phone
Residential address	
Suburb	State Postcode
2. LONG SERVICE LEAVE HOURS REQUESTED (to be completed by employee)	
Period of leave*	
Start date End date	
*Minimum 14 continuous calendar days must be requested.	
Number of ordinary hours*	
*Ordinary hours agreed to by employer and employee. For more information about ordinary hours and periods of leave, please refer to our How to Guide on our website.	
3. EMPLOYEE ACKNOWLEDGEMENT	
I understand that my employer may alter my leave dates and hours requested to confirm accuracy with the roster in which I am employed.	
Employee signature	Date
4. EMPLOYER DETAILS	
Employer name	
Employer ID	
Form must be submitted by an employer authorised contact. Coal LSL cannot accept forms from employees.	

Submit form online via **Online Services**

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