 **Annual Leave Request**

 **1 October 2020 to 30 September 2021**

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| Name:  | Email:  |

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| Period of Leave - Inclusive | Leave Entitlement:  |
| Start Date | End Date | Half Days Specify am or pm | Total Days Taken | Total Days Remaining | Line Manager’sSignature | HR Rec. |
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| **Return completed form by email to:** OncologyHR@admin.cam.ac.uk**Please re-use the same form each time you request leave and do not send paper copies.****All annual Leave queries to:** OncologyHR@admin.cam.ac.uk |