|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Is this an amended application?**  Yes  No | | | **Send completed form to** [**payroll@ecu.edu.au**](mailto:payroll@ecu.edu.au) | | | | | |
| **Employee Details** | | | | | | | | |
| Employee No. |  | Campus | | | | Select a campus. | | |
| Employee last name: |  | Employee other names: | | | |  | | |
| School/Centre | Select school/centre | Business Unit | | | |  | | |
| **Part-time Employees: please indicate hours worked each week:** | | | | | | | | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | ***Fri*** | ***Sat*** | ***Sun*** | ***Mon*** | ***Tues*** | ***Wed*** | ***Thurs*** | | ***Pay week:*** |  |  |  |  |  |  |  | | ***Non Pay Week:*** |  |  |  |  |  |  |  | | | | | | | | | |
| **Nature and Period of Leave** *(Show Inclusive Dates)* | | | | From | To | | No. of hours/ days/weeks | office use |
| Long Service Leave  Please select payment type: Choose payment type.  Please select FTE : Choose FTE. | | | | Select date. | Select date. | |  |  |
| Annual Recreational Leave | | | | Select date. | Select date. | |  |  |
| Leave without pay | | | | Select date. | Select date. | |  |  |
| Sick Leave Without Medical Certificate - Self | | | | Select date. | Select date. | |  |  |
| Sick Leave Without Medical Certificate - Family Member | | | | Select date. | Select date. | |  |  |
| Sick Leave with Medical Certificate - Self | | | | Select date. | Select date. | |  |  |
| Sick Leave with Medical Certificate - Family Member | | | | Select date. | Select date. | |  |  |
| Other *(e.g. Defence Force Leave, Jury Duty)*  Specify: | | | | Select date. | Select date. | |  |  |
| Comment (if required) | | | | | | | | |
| **Authorisation** | | | | | | | | |
| Applicant: | | | | Signature: | | | | Select date. |
| Approval as per [HR Delegations](https://edithcowanuni.sharepoint.com/:b:/r/sites/SGSC-UG/Delegations%20and%20Authorities/HR_delegations.pdf?csf=1&web=1&e=GNoArK) | | | | Signature: | | | | Select date. |

**Superannuation -** There are several options relating to your superannuation that you may want to consider when taking leave from the University.  You are encouraged to speak to the UniSuper on Campus Consultant and discuss any potential impacts on your superannuation.  Please visit <http://www.unisuper.com.au/employers/universities/edith-cowan-university>  
 **Parking permit -** Prior to commencing extended leave, staff with a parking permit are advised to contact Security and Traffic services on 6304 2226 or [parking@ecu.edu.au](mailto:parking@ecu.edu.au) to obtain information about options relating to your parking permit whilst on leave.

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| --- | --- |
| **PAYROLL SERVICES USE ONLY** | |
| Processed by: | Checked by: |
| Copy to Super (1/2pay LSL,LWOP) | Increment/Accrual dates adjusted for LWOP |