

Sickness and Absence Form

(Not Holiday Leave)



This form should be used to record all absences whether paid or unpaid.

All absences must be recorded and authorised by a manager

Absence record forms will be held in the office - you may keep a copy yourself if you wish.

Employee No. : _____ Date: _____

Employee Name : _____

First Day of Absence

| Day | Date |
|-----|------|
| | |

Last Day of Absence

| Day | Date |
|-----|------|
| | |

Number of Days

| |
|--|
| |
|--|

For half days please state AM or PM

Reason for absence

Enter relevant code into box

- S** = Sickness
- C** = Compassionate Leave
- M** = Maternity/Paternity/Adoptive Leave
- J** = Jury Service / Other Public Duties
- A** = Planned Paid Absence

- B** = Planned Unpaid Absence
- P** = Parental Leave (unpaid)
- D** = Leave to care for Dependents
- U** = Unpaid Planned Absence
- V** = Unpaid Unplanned Absence

| |
|---------------------|
| Signed by Employee: |
| |
| Date: |

| |
|--------------------|
| Signed by Manager: |
| |
| Date: |

Please note, all absence must be recorded on the Employee Attendance Record.