

CASH OUT ANNUAL LEAVE APPLICATION FORM – ACADEMIC STAFF

I, **NAME:** _____, **POSITION:** _____
and **EMPLOYEE NUMBER:** _____ wish to cash out _____ hours annual
leave in accordance with Clause 4.1.10 of the *Macquarie University Academic Staff Enterprise
Agreement (2011)*.

My annual leave balance after the above annual leave is cashed out will be _____ hours.

I understand and agree that:

- i. I am only able to cash out annual leave once in the life of the above Agreement.
- ii. The balance of my annual leave will be greater than 280 hours (8 weeks) once the above annual leave is cashed out.
- iii. The cashed out leave will be paid at the same gross amount that would have been payable if I had taken the leave.
- iv. It is my responsibility to seek appropriate financial, taxation and superannuation advice related to any impacts arising from my application to cash out annual leave.

The payment of the cashed out annual leave will be processed in the first full pay period after this form has been received by Human Resources.

Applicant's Signature: _____ **Date:** ____ / ____ / ____

Approval Signature: _____ **Date:** ____ / ____ / ____
Head of Faculty/ Office

HR USE ONLY:

Processed/Entered _____(inits) Date: ____ / ____ / ____ Checked _____(inits) Date: ____ / ____ / ____