King's College Hospital
NHS Foundation Trust

PAYMENT IN LIEU OF ANNUAL LEAVE

Please Note: This form is only compatible with Internet Explorer and Adobe Reader

This form should be completed for employees who are unable to take annual leave due to sickness absence, and require a to be made in lieu of annual leave.

Please do not end the sickness absence period in the Health Roster, as this will affect the sickness entitlement.

Please ensure the annual leave to be paid is deducted from the Annual Leave Entitlement in the Health Roster.

Should you have any queries regarding the completion of this form, please contact Payroll on 020 3299 9090 option 3

**** Mandatory Field; if you do not complete all mandatory fields your request will not be processed and you will be asked to complete again***

Following completion this form may be submitted by e mail to kch.payrollandexpenses@nhs.net

If completing this form by hand please complete in CAPITALS and use BLACK INK only.

1. EMPLOYEE DETAILS

Assignment No.* - Position Number *

Surname *

Forename(s)*

2. HOURS/SESSIONS TO BE PAID

Absence Start Date* (D D M M Y Y Y Y)

Annual Leave Hours/Sessions To Be Paid* .

3. MANAGER AUTHORISATION

This form will be returned to you if not completed as directed and may result in a delay in payment or employee change.

Employee No*

Forename*

Surname *

Authorised Signature

not required if being submitted electronically

Date* (D D M M Y Y Y Y)

Contact No.*

Work Email Address *

Clear Form