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**ANNUAL LEAVE PURCHASE SCHEME**

**APPLICATION FORM 2024 - 2025**

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| Name: | …………………………………….. | Assignment number: | …………… |
| Directorate: | …………………………………….. | | |
| Position title: | …………………………………….. | | |
| Line manager: | …………………………………….. | | |

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| **REQUEST**  My weekly contracted weekly hours are ……  I would like to purchase …… week (s) of additional leave.  (1 x weekly contracted hours or maximum of 2 x weekly contracted hours) |
| **REASON FOR REQUEST** (Note: employees do not have to provide this information, but may wish to do so to support their application.)  ………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| I confirm that I have read and understood the Annual Leave Purchase Scheme and comply with the eligibility criteria. I authorise Employee Services Payroll Team to make a deduction from my salary in equal monthly payments following 01April (or less if employed on a temporary or fixed-term contract). I understand that once this application has been approved, the agreement cannot be amended.  I understand that purchasing annual leave will have an implication on my pension benefits and I have the opportunity to buy back any lost pension as a lump sum through Additional Pension Contributions.  If my annual leave year runs from the month in which my birthday falls, I confirm I am happy to change to an annual leave year from 01 April to 31 March.  Signed: …………………………………….. Date: ………… |

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| **TO BE COMPLETED BY THE LINE MANAGER**  **(\*\*\* Amendment - 1 weeks leave is not automatically approved and at manager’s discretion \*\*\*)**  I acknowledge and approve the above request to purchase annual leave (1 week or 2 weeks).  The above request to purchase 1 or 2 weeks annual leave has not been approved. I have discussed this with the employee and explained why I have declined the request in writing (copy attached).  If 2 weeks leave was not approved, will the employee be purchasing 1 weeks leave?  Yes – the employee will continue to purchase 1 weeks leave  No – the employee does not wish to purchase annual leave  Signed (Manager): ……………………………………………………… Date: ………………… |

**This completed form should be emailed to** [leavepurchase@valeofglamorgan.gov.uk](mailto:leavepurchase@valeofglamorgan.gov.uk) **– do not send hard copy**