



APPLICATION FOR LEAVE WITH INCOME AVERAGING

Information on this form is used to assess requests for Leave with Income Averaging in accordance with approved policies. It is protected by the provisions of the *Privacy Act* and should be stored in standard employee bank PSE 901.

PART I EMPLOYEE DATA		
Surname (Print)		Given name / Initials
Department		Branch / Division / Section
Address		Personal Record Identifier

PART II APPLICATION		
1st period of leave FROM:	TO:	Duration
2nd period of leave FROM:	TO:	Duration
I request a leave arrangement in accordance with the Leave with Income Averaging Policy. I agree not to work for the federal Public Service during the above period(s) of leave.		Date
Signature _____		Day Month Year

PART III ESTIMATED SALARY (to be completed by Compensation Unit)			
Current Annual Salary and Allowances _____	Bi-weekly amount _____	Deductions _____	Net Take Home (approximate) _____
Less leave without pay _____	Bi-weekly amount _____	There will be some adjustments in respect of certain statutory deductions such as Income Tax, CPP/QPP & UI and you may be able to adjust some voluntary deductions such as CSB and CO-OP.	
Reduced Annual Salary and Allowances _____	Bi-weekly amount _____	Deductions Total (Unadjusted) _____	Take Home (Approximate) _____

PART IV APPROVAL		
<input type="checkbox"/> LEAVE ARRANGEMENT APPROVED	1st period of leave From: _____	To: _____
	2nd period of leave From: _____	To: _____
<input type="checkbox"/> Duration of leave arrangement (12 month averaging period)	From: _____	To: _____
<input type="checkbox"/> I certify that the employee meets the eligibility criteria		
<input type="checkbox"/> LEAVE ARRANGEMENT NOT APPROVED for the following reasons:		

Responsibility Centre Manager (print name)	Responsibility Centre Manager (signature)	Date
		Day Month Year

