



IN-SERVICE APPLICATION

1. Employee details (to be completed by employee)

Surname First name/s

Date of birth LSL number

Postal address

State Postcode Email

2. LSL hours requested

Period of leave From: To:

* Minimum 14 continuous calendar days must be requested.

Number of ordinary hours

* Ordinary hours agreed to by employer and employee.

For more information about ordinary hours and periods of leave, please refer to our 'How To' guide.

Employee's signature Date

3. Employer details (to be completed by an authorised officer)

Employer name Employer ID

Employer email

Employer's signature Date

Return email address: leave@coallsl.com.au

Privacy Statement

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