



ATNZ Apprentice *Domestic Violence Leave* Application Form

Fax: 09 539 9890 | Email payroll@atnz.org.nz

All Application requests will be treated in strict confidence to ensure privacy and confidentiality.

(Please Print in Capitals)

Employee Number: _____

Apprentice Name: _____

Host Company: _____

Domestic Violence leave application needs to be completed/read in conjunction with ATNZ policy on Domestic Violence – Victims’ Protection.

Domestic Violence leave can be requested in days or units (ie hours).

To support your privacy and confidentiality, you have an option to put “*Compassionate*” leave (instead of Domestic Violence leave) on your Timesheet that gets approved by your Host company in the week when you are requesting Domestic Violence leave.

I hereby request the following days as Domestic Violence leave:

Date of FIRST day of Leave:	Date of LAST day of Leave:
Date RETURNING back to work:	Total number of working days or units taken as Domestic Violence leave:

If you would like to discuss ATNZ Domestic Violence-Victims’ Protection policy, need support on anything that relates to your workplace or employment in general, or have questions about the leave application process please contact your Account Manager or Karolina Spencer, ATNZ HR Manager.

Apprentice Signature: _____ Date: _____

Approved by the Account Manager: _____ Date: _____