

# ACCUMULATED LEAVE AGREEMENT

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This agreement has been prepared in two identical copies, one for the employer and one for the employee.

|   |  |               |                      |  |  |        |
|---|--|---------------|----------------------|--|--|--------|
| Parties   | Employer's representative              |               |                      |  |  |        |
|   | Employee                               |               |                      |  |  |        |
| Background  | Starting date of employment:           |               |                      | Accumulated leave plan   |  |        |
|   | Right to annual holiday      days/year |               |                      | <input type="checkbox"/> preliminary<br><input type="checkbox"/> fixed |  |        |
|   |  | planned       |                      |  |  | actual |
|   | Annual holiday days                    | Holiday bonus | Other agreed days    | Total  |  |        |
| 1st year  |  |               |                      |  |  |        |
| 2nd year  |  |               |                      |  |  |        |
| 3rd year  |  |               |                      |  |  |        |
| 4th year  |  |               |                      |  |  |        |
| 5th year  |  |               |                      |  |  |        |
| Actual total :  |  |               |                      |  |  |        |
| Accumulated leave will be saved during the years ____ – ____ . Total:   |  |               |                      |  |  |        |
| With regard to years with no plan for accumulated leave, the parties must prepare one each year by 2 May. The plan can be amended by agreement for compelling reasons, in which case the change must be jointly noted well in advance.                      |  |               |                      |  |  |        |
| <b>Use of accumulated leave:</b><br>Leave agreed to be taken between _____.<br>The employer keeps separate records of accumulated leave.<br>If the term of employment ends before the accumulated leave is taken, the unused leave will be compensated for. |  |               |                      |  |  |        |
| Date and signatures   | Place                                  |               |                      | Date   |  |        |
| Employer representative's signature   |  |               | Employee's signature |  |  |        |