

# APPLICATION FORM FOR PAID AND UNPAID UNION LEAVE

(All applications must be submitted and authorised before the leave is taken)

**Section 1: TO BE COMPLETED BY THE APPLICANT IN ALL CASES**

Full Name (Block Capitals) ..... Grade: ..... Full Pay No: ..... / .....

RM Function: ..... Union Position: .....

RM Office: ..... Union Branch: .....

I wish to apply for release to perform the following Union activity/function.  
 .....  
 .....

From .....(Time and Date) To ..... (Time and Date) No. of hours .....

**NEXT STEP: APPLICANT SENDS FORM TO BRANCH SECRETARY FOR CONCURRENCE**  
 (NB. All applications will be sent to the Branch Secretary. Only 'Unpaid Leave' release requires counter-authorisation.)

**Section 2a: TO BE COMPLETED BY THE BRANCH SECRETARY (Please return to applicant within 3 days)**

Under the terms of the I.R. Framework, the above release should be classified as: **PAID/UNPAID**

Signature of Branch Secretary: .....

*(NB\* Examples of Paid and Unpaid Leave are listed overleaf.)*

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**Section 2b:**

I have examined the details of this application and confirm that release is appropriate and that in the case of: **Unpaid leave**, the cost of pay and allowances will be reimbursed.

Name: (Block Capitals) .....

Signature of Branch Secretary: ..... Date: .....

**NEXT STEP: BRANCH SECRETARY RETURNS FORM TO APPLICANT**  
 (Applicant then presents the application to the RM Line Manager.)

**Section 3: TO BE COMPLETED BY THE LINE MANAGER AND VERIFIED BY APPLICANT**

PAID/UNPAID LEAVE is authorised as above.  
 (Delete as applicable)

Line Managers Name (Block Capitals): .....

Budget Code (ESFS Code) to which repayment is to be credited: .....

1. In the case of UNPAID LEAVE central billing arrangements will apply and I certify that the application is with the knowledge and approval of my Trades Union who will reimburse Royal Mail the cost of pay and allowances for the Unpaid Leave or the substitution costs as appropriate.

Signature of Line Manager: ..... Signature of applicant .....

Date: ..... Date: .....

**NEXT STEP: MANAGER SENDS FORM TO: -**  
**Union Leave Team**  
**People & Organisational Development Services**  
**Pond Street**  
**Sheffield S98 6HR**

**Section 4: TO BE COMPLETED BY: P & ODS. SHEFFIELD**

Details of PAID/UNPAID (delete as applicable) leave have been recorded & coverage costs detailed overleaf

Signature of P & ODS ..... Date: .....

Name (Block Capitals) .....

Errors etc:  
 .....

**Section 5: TO BE COMPLETED BY INCOME CENTRE WHEN INVOICE RAISED AND SENT TO CWU HQ FOR PAYMENT**

Invoice Number ..... Income Centre .....

Name of Local Income Administrator (Block Capitals) .....

Signature of Local Income Administrator ..... Date .....