AARHUS UNIVERSITET

Documentation for paid out special holidays concerning holiday year 2018/2019

Name: _____

Civil reg.no.: _____

Department/section: _____

Number of special holidays to be paid out: ☐

Head of department´s/head of section´s signature

_____ _____

date signature

- ***The form must be submitted to the Salaries Office***

RESERVED FOR SALARIES OFFICE

LKO	Ord. holidays taken	Corr. to hours	No. of wkg. hours	Spec. holidays not taken	Days earnet