



**INTENSIVE CARE UNIT - RSCH**

**APPLICATION FOR ANNUAL LEAVE  
SHOs & SpRs**

NAME: \_\_\_\_\_

GRADE/ROTATION: \_\_\_\_\_

Date(s) of Leave:

From: \_\_\_\_\_

To: \_\_\_\_\_ (Inclusive)

From: \_\_\_\_\_

To: \_\_\_\_\_ (Inclusive)

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Please ensure that you have confirmed leave with Dr Barrera-Groba or Dr Kate Regan.  
Any necessary cover arrangements made must be notified to Pat Hall, ICU Secretary,  
and annotated on the rota.