



IRREGULAR VACATION PAY APPLICATION

NOTE TO APPLICANT: REGULAR VACATION PAYOUT IS ON JUNE 15 & NOVEMBER 15. ONLY **ONE** IRREGULAR VACATION PAY WITHDRAWAL IS PERMITTED UP TO A MAXIMUM OF \$300.00 PER CALENDAR YEAR. THE BALANCE WILL BE PAID AT THE REGULAR PAYOUT.

NAME: _____ SIN: _____

ADDRESS: _____

PHONE #: _____ PRESENTLY EMPLOYED? YES__ NO__ COMPANY: _____

WORK MONTH	EMPLOYERS	AMOUNT

IF YOU HAVE APPLIED OR WILL APPLY FOR EMPLOYMENT INSURANCE BENEFITS, YOU MUST REPORT YOUR VACATION PAY AS EARNINGS.

Reason for request:

- I will leave the jurisdiction of Local 837 on _____
- I registered with EI as being unemployed on _____
- Other reasons (list below). Please note that payment under this category is subject to approval.

I, THE UNDERSIGNED, HEREBY APPLY FOR VACATION PAY RECEIVED BY THE ADMINISTRATOR, ON MY BEHALF.

SIGNATURE: _____ INITIAL: DATE: _____

FOR OFFICE USE ONLY:

PAYMENT APPROVED: _____ PAYMENT DENIED: _____

PAYMENT APPROVED OR DENIED BY: _____ DATE: _____