



Letter to Employer to attend HSR 5 day training course

| Date: | |
|---|---|
| Dear | |
| | (Manager's name, position, title and Company) |
| Please be advised that | |
| | (Name and Workgroup) |
| is an elected HSR/DHSR and requests | to attend the following: |
| HSR 5 Day TrainingDate of course | |
| This course is ACTU Comcare approve | ed and is conducted by an ACTU Comcare approved trainer. |
| · · · · · · · · · · · · · · · · · · · | R has the right to choose their course of training and to be paid for the The PCBU (employer) must also pay any fees associated with this |
| Yours sincerely, | |
| G. Kayn!. | |
| Greg Rayner, DIVISIONAL SECRETARY. | |

Level 9, 365 Queen Street, Melbourne Vic 3000 (Australia)