

## CERTIFICATE OF MODIFICATION OR CANCELLATION OF LEAVE

### COMPANY INFORMATION

Name or company name :

Name and position of the representative acting on behalf of the employer (person authorised to sign on behalf of the company) :

Company registration number ::

Address of establishment : n° Street:

Postcode :

Municipality :

Phone number :

Email :

### SUBJECT: DEFERRAL OR CANCELLATION OF PAID LEAVE

I the undersigned, Sir/ Madam \_\_\_\_\_, in the capacity of \_\_\_\_\_, attests to the following:

Sir/ Madam \_\_\_\_\_, hired by our company has taken paid leave for the period from \_\_\_\_\_ to \_\_\_\_\_, which were validated in writing by us on \_\_\_ / \_\_\_ / \_\_\_

However, due to the following exceptional circumstances :

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We have asked Mrs/Mr \_\_\_\_\_, on the date of \_\_\_ / \_\_\_ / \_\_\_, to postpone paid leave to a later date.

Sir/Madam \_\_\_\_\_

\* *Certificate to be dated and signed by the employer's representative, preceded by the words "for all legal purposes". Company stamp MANDATORY.*

*From a criminal point of view, any false declaration constitutes fraud, which is recognised as an offence punishable by 5 years' imprisonment and a 375.000€ fine. Similarly, producing and using false documents is punishable by 3 years' imprisonment and a 45.000 € fine.*