



Request for Time Off

Note: You must submit requests for absences, other than sick leave **14 days prior** to the first day you will be absent.

Employee Name: _____ Job Title and Department _____

Type of Absence Requested:

- Vacation (PAID) Vacation (UN-PAID)
 Personal Time Off (PAID) Personal Time Off (UN-PAID)
 Sick (PAID) Sick (UN-PAID)
 Jury Duty (UN-PAID)
 Bereavement (max of 3 days) Immediate family only (spouse/domestic partner, children, parents, grandparents, grandchildren, siblings)
 Other (specify :) _____
(Maternity/Paternity/Leave of Absence, etc.)

Dates of Absence (mm/dd/yyyy)

From _____ **Until** _____ **Start work date** _____

Reason for Absence:

Employee Signature

Date

Manager Approval: **Approved** **Denied**

Comments:

Manager Name & Signature

Date