

## TIME OFF POLICY & REQUEST

- ⇒ Requests for all time off must be submitted to the office a minimum of **2 weeks** in advance for approval.
- ⇒ **Time off between April 1 and June 15 will be very limited**
- ⇒ All events keeping you from reporting to work need to be submitted on this form. (vacation, court dates, doctor & dentist appointments)
- ⇒ Requests need to be submitted when requesting a partial day off
- ⇒ Approval will be returned to you in your paycheck envelope
- ⇒ **If requesting non-consecutive dates off, please use a SEPARATE FORM for each date**

Today's Date:

Name:

Beginning date of time off:

If partial day off requested, what time are you leaving?  arriving?

Return date to work:

Reason:

**Office Only:** .....

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

Date Request Received:

Update Time off Calendar: