



Date:	Type of Request: Hours ____ Dates ____
Employee Name:	Starting on:
Manager Name:	Ending on:

Please Circle the Reason for Your Request	
Vacation	To Vote
Personal Reasons	Funeral/ Bereavement
Medical Reasons	Jury Duty
Family Reasons	Other: _____

Additional Comments:

I understand that this request is subject to approval by my employer.

Employee Signature: _____	Date: _____
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Manager's Approval:	
<ul style="list-style-type: none"> Accepted 	Manager's Signature: _____
<ul style="list-style-type: none"> Rejected 	Date: _____