

Vacation Request

Department # _____

Employee # _____

Name _____

2014



Since 1911

I REQUEST VACATION FOR THE FOLLOWING PERIOD:

Day	Month & Date	# of Hours
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

Employee Signature _____ Date _____

Approved By: _____ Date _____

OFFICE USE: Accepted: Declined: Reason _____