

McLaren Print System Order

Order No: 48678
Order Date: 2019-09-17
User: Meggan Overstreet
Phone: 810-342-2214

Ship Location: McLaren Flint 1 Central Patient Service Center/Meggan Overstreet
401 S Ballenger Hwy
Flint, MI 48532

Forms

Quantity: 500
Paragon Dept No: 90200
Dept Name: Patient Access
Company Number: 60

Order Total Price: 50.38

Item Number: MHCC-612
Item Description: Request for Scheduled Absence
Revision Date: 7/2014
Print: 1 sided black and white
Paper: 3 Part (White, Yellow, Pink)
Size: 8.5 x 11
Fold:
Finish:
Drill:
Misc Info:



McLaren Flint Region McLaren Upper Region
 McLaren Central Michigan McLaren Midland
 McLaren Eastern McLaren Western Michigan
 McLaren Eastern & Central McLaren Health Care
 McLaren Health Care McLaren Health Care
 McLaren Healthcare Group McLaren Health Care
 McLaren Health Care McLaren Health Care
 McLaren Health Care McLaren Health Care

Request for Scheduled Absence

Today's Date: _____
To: _____
From: _____

I would like to request the following time off:

PTO (to be used against your time of request must be within 90 days of request date)

Other (List Day, Beginning, etc.) _____

Comments: _____

PTO Hours Available: _____ Not Applicable

Approved: _____
 Date: _____

I have used the request for time off without a correct.

 Date: _____
 Supervisor Signature



McLaren Flint Region McLaren Upper Region
 McLaren Central Michigan McLaren Midland
 McLaren Eastern McLaren Western Michigan
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Spec Info: