

McLaren Print System Order

Order No: 7909 Reprint Previous Order No: 5856
Order Date: 2014-12-31
User: Angela Stevenson
Phone: 586-792-8877

Ship Location: Macomb Internal Medicine
36333 Harper Clinton Twp.
, MI

Forms

Quantity: 100
Paragon Dept No: 72050
Dept Name: Macomb Internal Medicine
Company Number: 60

Order Total Price: 10.87

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 Erie Region
 McLaren Eastern Michigan
 McLaren Jackson
 McLaren Macomb
 McLaren Midland
 McLaren Northern Michigan
 McLaren Saginaw
 McLaren Western Michigan
 McLaren Health Care
 McLaren Health Plan
 McLaren Intensive Care
 McLaren Cancer Institute
 McLaren Other

Request for Scheduled Absence

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

I would like to request the following time off:
 PTO (for two and a half days, one of requests must be in volume of at least 1 day)
 Other (for two and a half days, one of requests must be in volume of at least 1 day)

Comments: _____

PTO Hours Available: _____
Approved: _____ Not Approved: _____
I have read this request for time off and found it correct.

Date: _____ Employee Signature: _____
Date: _____ Supervisor Signature: _____

McLaren Erie Region
 McLaren Eastern Michigan
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