

McLaren Print System Order

Order No: 72958 Reprint Previous Order No: 8112  
Order Date: 2022-10-12  
User: Lisa Ardanowski  
Phone: 810-768-2073

Ship Location: McLaren Surgery and Endoscopy Center Attn: Lisa Ardanowski  
501 S. Ballenger Hwy  
Flint, MI 48532

Forms

Quantity: 1000  
Paragon Dept No: 30014  
Dept Name: Surgery and Endoscopy Center  
Company Number: 60

Order Total Price: 96.00

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 Health Region  
 McLaren Cancer Management  
 McLaren Children  
 McLaren Endoscopy  
 McLaren Health Care  
 McLaren Hospital  
 McLaren Intensive Care  
 McLaren Medical Center  
 McLaren Outpatient  
 McLaren Physical Therapy  
 McLaren Rehabilitation  
 McLaren Surgery  
 McLaren Women's Health  
 McLaren Workforce

McLaren Cancer Institute  
 McLaren Health Region  
 McLaren Cancer Management  
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 McLaren Hospital  
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 McLaren Outpatient  
 McLaren Physical Therapy  
 McLaren Rehabilitation  
 McLaren Surgery  
 McLaren Women's Health  
 McLaren Workforce

**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 increments of 15 minutes)  
 Other (for two and a half days, one of requests must be in increments of 15 minutes)  
Details: \_\_\_\_\_  
Comments: \_\_\_\_\_  
PTO Request Available: \_\_\_\_\_ Not Approved  
Approved: \_\_\_\_\_  
I have read this request for time off and find it correct.  
Date: \_\_\_\_\_ Employee Signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Supervisor Signature: \_\_\_\_\_

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