## **REQUEST FOR SCHEDULED TIME OFF**

3 Hole 1/4 4 1/4 c-to-c	COMPLETE ONE FORM PER PAY PERIOD FOR BENEFIT TIME REQUESTED																
4 4 1/4	SECTION1:																
c-to-c	1. E	mploy	ee Na	ame:		2. Title:											
	3. Employee Number:					4. Department: 5. Unit:											
	6. S	hift:				7. Hire Date:											
	Benefit Hours: Requesting					\	/acatio	on		al Time	Other						
	PLEASE CIRCLE APPROPRIATE MONTH AND DAY(S) YOU ARE REQUESTING OFF.																
	JAN	FE	В	MAR	APRIL	MA	Υ,	JUNE	JULY	AL	JG	SEPT	OCT		NOV	DEC	
$\supset$	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
	Emp	loyee	Signa	ature:								_ Date: _					
	Date	Recei	ived:						_ Receiv	ved by	:						
				□ <b>A</b>	PPROVE	∃D				□ F	Revis	ed as fo	ollows				
	Comments:																
)	Auth	orized	Sign	ature:							C	)ate:					

## **REQUEST FOR SCHEDULED TIME OFF**

3 Hole 1/4 4 1/4 c-to-c	COMPLETE ONE FORM PER PAY PERIOD FOR BENEFIT TIME REQUESTED																	
141/4	SECTION1:																	
· c-to-c	1. E	Employ	ee Na	ame:		2. Title:												
	3. Employee Number:					4. Department: 5												
	6. Shift:					7. Hire Date:												
		efit Ho Juestin				Vacation				Personal Time					Other			
	PLEASE CIRCLE APPROPRIATE MONTH AND DAY(S) YOU ARE REQUESTING OFF.																	
	JAN	I FE	В	MAR	APRIL	MA	ΥJ	UNE	JULY	AL	JG	SEPT	OCT		NOV	DEC		
)	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16		
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
	Emp	oloyee	Signa	ature:								_ Date: _						
	Date	e Rece	ived:			Received by:												
				<b>□</b> A	PPROVE	ED 🗌 DENIED			ED	D				i				
	Corr	nments																
	Auth	norized	Sign	ature:							C	Date:						