

Vacation Request

l,	, hereby request permission to				
	(Print Name)				
vacation lea	ve on the following o	late(s):			
	to	from _		to	
(Date)	(Dat	e)	(Time)		(Time)
will return to work on:			at		
		(Date)		(Tin	ne)
	Employees Signature				
	Linployees signate	110		Date	
	☐ Approved				
	L Approved				
	☐ Not Approved				
	Supervisors Signat	ure		Date	
					
	Second Level Supervisors Signature			Date	

Please submit your vacation requests to your supervisor who will review all requests to assure that adequate staff are available at all times. Your request will be approved or not approved, signed and a copy returned to you.

To assist in scheduling the workload during the year, your supervisor needs to schedule vacations in advance. Having your request for vacation time approved in advance will also permit you to plan for your vacation. Priority of choice of vacation dates is through seniority within each department. Seniority applies only to vacation days earned for the current year. Scheduling of vacation accrued in prior years must wait until other department personnel have submitted their requests for use of vacation days earned for the current year.