

Employee Vacation Request Form

Amount of Vacation Days re	questingStarting Date_	Ending Da	te
Supervisor's Name	Signat	cure	_
Approved or Declined	Date	e	
	20	23	
January	February	March	April

2 3 4

16 17 18

23 24 25

10 11

29	30	31						
May								
Su	Mo	Tu	We	Th	\mathbf{Fr}	Sa		
	1	2	3	4	5	6		
7	8	9	10	11	12	13		
14	15	16	17	18	19	20		
21	22	23	24	25	26	27		

Su Mo Tu We Th Fr Sa

22 23 24 25 26 27 28

9 10

28 29 30 31

17

2 3 4 5 6 7

11 12 13 14 18 19 20 21

Employee's Name

June									
Su	Mo	Tu	We	Th	\mathbf{Fr}	Sa			
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18	19	20	21	22	23	24			
25	26	27	28	29	30				

Su Mo Tu We Th Fr Sa

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July									
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Date Requested

Su	Mo	Tu	We	Th	\mathbf{Fr}	Sa
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August

Su Mo Tu We Th Fr Sa

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September								
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24	25	26	27	28	29	30		

October										
Su	\mathbf{Mo}	Tu	We	Th	Fr	Sa				
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8	9	10	11	12	13	14				
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22	23	24	25	26	27	28				
29	30	31								

November								
Mo	Tu	We	Th	\mathbf{Fr}	Sa			
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6	7	8	9	10	11			
13	14	15	16	17	18			
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27	28	29	30					
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December								
Su	Mo	Tu	We	Th	\mathbf{Fr}	Sa		
					1	2		
3	4	5	6	7	8	9		
10	11	12	13	14	15	16		
17	18	19	20	21	22	23		
24	25	26	27	28	29	30		
31								

IMPORTANT NOTE

Vacation Forms must be submitted & approved two weeks prior to pay period.

Your vacation days will be paid as normal pay week

A request for vacation does not necessarily mean you will get the dates you fill out. This is due to overlapping. We cannot have all employees on leave at the same time.

<u>DO NOT BOOK PLANE/HOTEL/CAR</u> or make any other reservations until you have received Confirmation from the office & Supervisor that you are guaranteed the time you requested.