|  |
| --- |
| OFFICE STAMP |

**HOLIDAY YEAR:**

**EMPLOYEE NAME**:

**HOLIDAY REQUESTED:**

**HOLIDAY DATES (FROM):**

**HOLIDAT DATES (TO):**

**TOTAL NUMBER OF WORKING DAYS:**

**SIGNED:**

**DATE:**

|  |
| --- |
| **APPROVAL BY MANAGER****FOR OFFICE USE ONLY****PRINT:****SIGNED:****DATE:** |