## Absence Request

|  |
| --- |
| Absence Information |
| Employee Name: |  |
| Department: |  | Manager:  |  |
| Total # of Days |  | Total # of Hours: |  |
| Type of Absence Requested: |
|  | [ ]  | Sick | [ ]  | Vacation | [ ]  | Bereavement |  [ ]   | Time Off Without Pay |
|  | [ ]  | Military | [ ]  | Jury Duty | [ ]  | Maternity/Paternity | [ ]  | Other |
|  |
| Dates of Absence: From: |  | Thru: |  |
| Reason for Absence: |
|  |
| **You must submit requests for absences, other than sick leave, two days prior to the first day you will be absent.** |
|  |  |
| Employee Signature | Date |
|  |
| Manager Approval |
|  | [ ]  | Approved |
|  | [ ]  | Rejected |
| Comments: |
|  |
|  |  |
| Manager Signature | Date |
| **\*Note: If the time requested is greater than 5 business days, the request must be approved by Karen Bond.** |
|  |  |
| CEO Signature (if requesting more than 5 business days)  | Date |