****

**Vacation and Sick Leave Request Form**

Date of request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Employee name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vacation\_\_\_

Sick leave\_\_\_

Start date: \_\_\_\_\_\_\_ End date: \_\_\_\_\_\_\_\_ Total hours: \_\_\_\_\_\_\_\_

**Bereavement leave** (Unpaid)

Start date: \_\_\_\_\_\_\_\_ End date: \_\_\_\_\_\_\_\_ Total hours: \_\_\_\_\_\_\_\_

**Jury duty leave (Unpaid)**

Start date: \_\_\_\_\_\_\_\_ End date: \_\_\_\_\_\_\_\_ Total hours: \_\_\_\_\_\_\_\_

Other \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Start date: \_\_\_\_\_\_\_\_ End date: \_\_\_\_\_\_\_\_ Total hours: \_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Employee Signature                                                       Date

Approved \_\_\_\_\_ Denied\_\_\_\_\_\_

Reason\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       \_\_\_\_\_/\_\_\_\_/\_\_\_\_
Manager Signature                                                    Date