

## **Vacation Request**

Name:					Pay Location:			QW:		
Earned Vacation Balance: "As of Date"				Balaı	Balance Hours:			_ Payroll Clerk's Initials:		
catio	n(s) Requ	ested: All d	lates inclusive	e. (Minimum one hour.)						
		Preferred						Alternate		
hoice	Days	Hours	From	To (Including)	Choice	Days	Hours	From	To (Including)	
1					1A					
2					2A					
3					3A					
			n connection with a propriate leave of ab	vacation period? osence form.) YES	]NO		Signature of Employ	/ee	Date	
prova	ı									
oice(s)	that is (are	) approved:			Re	marks:				
		Administrator	approval	Date						
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Preferably before departing on vacation, or without fail upon returning, submit Certificate of Absence to Payroll Clerk. If vacation falls in two pay periods, submit one for each period.