

EXEMPT STAFF TIME-OFF REQUEST FORM

The form is to be used by all exempt employees when requesting staff time off. Requests are to be made in advance and approved by your manager.

Name: _____

Title: _____

Department: _____

Supervisor: _____

Dates requested: _____ **to** _____

Type of Time-Off Requested:

- ☐ Vacation
- ☐ Floating Holiday (indicate holiday being substituted) _____
- ☐ Other (explanation - attach backup if necessary)
- _____
- _____
- _____

Employee Signature

Date

Supervisor: ☐ Approved ☐ Not Approved ☐ Modified

Supervisor Signature

Date

Attach signed Time-Off Request Form to the monthly Time-Off Request Spreadsheet and submit to Human Resources.