

Employee Absence Request Form

1. Basic Information

- Full Name: _____
- Employee ID: _____
- Department: _____

2. Absence Request Details

- Requested Start Date: _____
- Requested End Date: _____
- Total Days Off Requested: _____
- Type of Absence:
 - Sick Leave
 - Vacation Leave
 - Family Leave
 - Other: _____

3. Reason for Request

- Please explain briefly:

4. Manager Acknowledgment

- Manager Name: _____
- Approval Status: Approved Denied
- Comments: _____

5. Employee Certification

I certify that the information provided is true and accurate.

- Employee Signature: _____ Date: _____