

# Vacation Request/Approval Record \_\_\_\_\_

PLEASE PRINT

Name \_\_\_\_\_ Employee/Payroll # \_\_\_\_\_  
LAST FIRST MIDDLE

Department \_\_\_\_\_ Phone \_\_\_\_\_

Hire Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Employee is eligible for \_\_\_\_ days of vacation as of \_\_\_\_/\_\_\_\_/\_\_\_\_

Request Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**EMPLOYEE:** Please shade the dates you wish to take as vacation days. Return to your supervisor for approval.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	TOTAL		
JAN																																		
FEB																																		
MAR																																		
APR																																		
MAY																																		
JUN																																		
JUL																																		
AUG																																		
SEP																																		
OCT																																		
NOV																																		
DEC																																		

**SUPERVISOR:** Please check the appropriate approval

TOTAL

All of the days requested are approved

The following days are not approved \_\_\_\_\_

for the following reason(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**EMPLOYEE:** If requested dates are not approved, please select alternate dates and resubmit for approval

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



Vacation Request / Approval Record #5885  
 This form does not constitute legal advice to the employer. To determine whether an employee would violate Federal, State or Local law, you should seek professional advice. Seller assumes no responsibility for the employer's use of this form and decisions based on the information provided on this form.