#### Classic Practice Resources, Inc.

##### **Time off Request Form**

**Use:** 1] Copy on Yellow colored Paper, 2] Complete this form when requesting time off from work for a short period of time for

 **personal reasons**. 2] Staff Member fills this form out in **d u p l i c a t e** and sends **b o t h** copies to their Supervisor.

To:

 Your Supervisor Date

From:

**Date(s) of Absence Requested to**

Type of Absence Requested:

Sick Vacation Bereavement Time Off Without Pay

Military Jury Duty Maternity/Paternity Other

Reason for Absence:

My position (is) (is not) covered. If so, by whom:

The person covering my position is *fully* advised of my duties; see attached agreement.

I request this time be covered by: Vacation Time \_\_\_\_\_\_\_\_ Sick Leave Time\_\_\_\_\_\_

Payroll Deduction \_\_\_\_\_\_\_\_\_ Made-Up Time \_\_\_\_\_\_\_\_

If selecting "Made-Up Time," when? [Salaried employees: must be in same work week]\_\_\_\_\_\_\_\_\_

 ***End of section. Send both copies to your Supervisor.***

**Supervisor #1:**

□ Approved □ Disapproved Signature:

Comment

**Supervisor #2:**

□ Approved □ Disapproved Signature:

Comment

Note: If approved, send one copy back to the staff member making the Request, and route the second copy as per the routing below. Each individual below makes note of the Request, initials beside their position, and routes this Request on to the next person.

 1. Receptionist (In charge of attendance)

 2. Scheduling Coordinator (In charge of scheduling at front desk)

 3. Manager (In charge of routing a copy with payroll to bookkeeper to be filed in the

Personnel file of employee)

If the supervisor disapproves this Time Off Request, send one copy back to the staff member making the Request, and route the second copy to the Personnel Manager, who files this Request in the Personnel File of employee.