



# AUTHORIZATION FOR TIME OFF

ATO#100721

### EMPLOYEE INFO:

NAME:

PHONE #

TODAY'S DATE

DEPARTMENT:

### TYPE OF LEAVE:

- Sick Leave
- Volunteer Day Time
- Vacation Time
- Personal Responsibility
- Other

Explain if necessary.

I am requesting time off for the following days: (No more than one month per sheet)

DATE(S) REQUESTED:

  
  
  
  


TOTAL NUMBER OF HOURS:

  
  
  
  


### OFFICE USE ONLY

### APPROVALS:

EMPLOYEE SIGNATURE:

DATE:

SUPERVISOR SIGNATURE

DATE:

BUSINESS MANAGER

DATE: