



Leave Request Form

Employee Name: _____

Department: _____

Date: _____

I request to use:

_____ Vacation Leave

_____ Compensatory Leave

Date(s) Requested: _____

Total # of Hours Requested: _____

Date I Will Return to Work: _____

Employee Signature: _____

Date: _____

Approval:

_____ Yes

_____ No (reason) _____

Supervisor's Signature: _____

Date: _____

- Compensatory leave time may be taken in quarterly, half-hour, or one-hour increments.
- Requests for compensatory leave must be used within one (1) year of accrual.
- An employee may retain no more than 40 hours of compensatory leave per fiscal year ending June 30th. Hours over 40 will be paid the close of the fiscal year by July 15th.
- Vacation leave may only be taken after six (6) months of continuous service.
- Vacation leave may be taken in quarterly or one-hour increments.