

# ABSENCE REQUEST FORM – Vacation, Sick Time

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Manager: \_\_\_\_\_

Job Title: \_\_\_\_\_

Reason for Absence

Vacation     Sick     Other (see explanation)

Number of days absent: \_\_\_\_\_

Beginning date of absence: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Return to work date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Total sick hours requested: \_\_\_\_\_

Total vacation hours requested: \_\_\_\_\_

Explanation if reason for absence is marked as “other,” or comments: \_\_\_\_\_

Employee’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Name (Please Print): \_\_\_\_\_

Approved ( ) Denied ( ) (attach explanatory material, if necessary):	
Manager: _____	Date: _____