



## Vacation Request Form

All vacation requests must have a supervisor's signature and must be submitted for recordkeeping to Payroll in the Business Office. Please note that vacation must be taken in at least  $\frac{1}{2}$  day increments.

*(Please print)*

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

Supervisor Name: \_\_\_\_\_

Department: \_\_\_\_\_

Vacation Dates Requested: \_\_\_\_\_

Total Hours Vacation Requested: \_\_\_\_\_

Total Hours Vacation Remaining: \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Business Office Use:**

Entered: \_\_\_\_\_