

Absence Request

Absence Information

Employee Name: [text box]

Shop Location: [text box] Department: [text box]

Manager: [text box]

Type of Absence Requested:

Sick Vacation Bereavement Time Off Without Pay

Military Jury Duty Maternity/Paternity Other

Dates of Absence: From: [text box] To: [text box]

Reason for Absence:

[Large greyed-out text area for Reason for Absence]

You must submit requests for absences, other than sick leave, two days prior to the first day you will be absent.

Manager Approval

Approved: [text box]

Rejected: [text box]

Comments:

[Large greyed-out text area for Comments]

Manager Signature: [text box]