

Vacation Request Form

Name _____ Date _____

According to policy, I would like to request the following time off:

Vacation – Beginning _____ Ending _____

Total Number of Days _____ (Salary) Total Number of Hours _____ (Hourly)

Personal Time – Beginning _____ Ending _____

Total Number of Days _____ (Salary) Total Number of Hours _____ (Hourly)

In case of an emergency, I can be contacted by: Home Other (See below)

Name _____ Address _____

Telephone: _____

For Pastors Only

During the time of my absence, the following will speak in my churches:

Church _____

Sabbath _____ Name _____

Sabbath _____ Name _____

Church _____

Sabbath _____ Name _____

Sabbath _____ Name _____

Church _____

Sabbath _____ Name _____

Sabbath _____ Name _____

Please send in all three copies upon initial request. The yellow copy will be returned after the requested time is approved.

OFFICE USE ONLY – Approval and Record Keeping

Approval: Dept. Head: _____ President: _____

Recorded by Secretary: _____ Total Vacation Days Remaining: _____ (Salary)

Total Vacation Hours Remaining: _____ Total Personal Time Remaining: _____

Comments: _____

White – File

Yellow – Employee (after approval)

Pink - Secretary