



## Request for Leave

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

**Location/ Site:** \_\_\_\_\_

**Leave Requested:**

Beginning Date: \_\_\_\_\_

Ending Date: \_\_\_\_\_

**Total Number of Days** \_\_\_\_\_

**Purpose of Leave:**

Personal

Vacation

Leave w/o Pay

Other

**Explanation:**

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**Employee Signature:**

\_\_\_\_\_ Date: \_\_\_\_\_

**Approved By:**

\_\_\_\_\_ Date: \_\_\_\_\_

DIRECTOR

**Approved By:**

\_\_\_\_\_ Date: \_\_\_\_\_

EXECUTIVE DIRECTOR