



## Request for Scheduled Time Off

Date of Request: \_\_\_\_\_

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

Employee ID: \_\_\_\_\_

### Type of Request:

Leave Early      Date: \_\_\_\_\_      Time: \_\_\_\_\_

Arrive Late      Date: \_\_\_\_\_      Time: \_\_\_\_\_

Single Day Off      Date: \_\_\_\_\_

Multiple Days Off      Start Date: \_\_\_\_\_      End Date \_\_\_\_\_

### Please pay me (select from boxes below):

PTO       Sick Pay       Bereavement       Other: \_\_\_\_\_

\_\_\_\_\_ Hours for my requested Time Off

**Please Note: If no Sick Pay is available, PTO will be taken.**

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

\_\_\_\_\_  
*Date*

### Manager Approval

Approved      Comments: \_\_\_\_\_

Rejected      Comments: \_\_\_\_\_

\_\_\_\_\_  
*Manager Signature*

\_\_\_\_\_  
*Date*

*When possible, employees should request scheduled time off at least 30 days in advance. Requests will be approved, denied, and/or revised based on a number of factors, including business needs and staffing requirements. Craco, in its sole discretion, has the right to determine when employees take PTO the application of PTO benefits, and/or the duration of the PTO.*

**When sick pay is requested but previously used, PTO will be taken.**

*Upon request employees can receive a copy of all approved or denied time off requests. Original documents will be forwarded to payroll.*