



Name _____

Employee ID _____

Leave requested for Advance Vacation Leave
 Advance Sick Leave

REASON FOR REQUEST:

CURRENT VACATION LEAVE BALANCE _____

CURRENT SICK LEAVE BALANCE _____

CURRENT BONUS LEAVE BALANCE _____

EMPLOYEE'S AUTHORIZATION

I, _____, HAVE REQUESTED A LEAVE ADVANCE. I ACKNOWLEDGE THAT THE USE OF ADVANCED LEAVE REPRESENTS A LIABILITY TO MY EMPLOYER. SHOULD I SEPARATE WHILE THERE IS STILL AN OUSTANDING ADVANCE, THE VALUE OF THAT ADVANCE WILL BE DEDUCTED FROM MY FINAL PAYCHECK.

EMPLOYEE'S SIGNATURE _____ DATE _____

SUPERVISOR'S SIGNATURE _____ DATE: _____

SUPERVISOR'S PHONE _____ DATE: _____

For Human Resources Staff Use Only

ACCRUAL RATE: _____ MAX AMOUNT ALLOWED FOR ADVANCE _____

ADVANCE APPROVED DENIED

AUTHORIZED AGENCY REP _____