



Corporate Management Group

Absence Request

Absence Information

Employee Name: Alan Latt
 Department: _____
 Supervisor: Chris

Type of Absence Requested:

- Sick Vacation Bereavement Time Off Without Pay
 Military Jury Duty Maternity/Paternity Other

Dates of Absence: From: 05.24.2015 To: 05.24.2015

Reason for Absence:

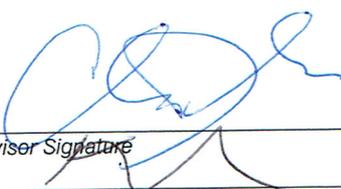
You must submit requests for absences, other than sick leave, two days prior to the first day you will be absent.

 _____ 05.13.2015
 Employee Signature Date

Manager Approval

- Approved
 Rejected

Comments:

 _____ 5-13-15
 Supervisor Signature Date
 _____ 5/15/15
 CMG Signature Date