



Not approved -
[Signature]
6/25/18

Time Off Request Form

EMPLOYEE NAME: Helena chy

AGENCY YOU WORK FOR: CMG

TODAY'S DATE: 06-21-18

REQUESTED DATE(S): 07-05-18 ; 07-06-18 , 07-07-18

VACATION UNPAID LEAVE

(For CMG use only: Enter number of hours that will be Paid _____ Unpaid _____)

SHIFT YOU WORK: 1st _____ 2nd 3rd _____

REASON: Vacation

EMPLOYEE'S SIGNATURE: *[Signature]*

By signing this form I understand that if this time off request is an unplanned absence it will count as a no fault day(s) toward my attendance. I also understand that if I do not have enough vacation hours to cover this time off request, it will count as a no fault day(s) toward my attendance

SUPERVISOR'S SIGNATURE: _____

By signing this form I am stating I have enough coverage for the day(s) be off. I am not approving his time off as paid, unpaid, or no fault. This Resources.

HUMAN RESOURCES' SIGNATURE: _____

I have received this employee's time off request and affirm that he/she employee does not have sufficient time accrued, this is considered a no company's attendance policy.

Trade secret: confidential commercial information exempt from disclosure

Another employee will already be gone on vacation & has had her TOR in for several weeks already. Kaunoa will let Helena + Maria know these are not approved. Thx!