



"your workforce management & staffing experts"

# Request for Time off

## Absence Information

Employee

Name: Kelly Sutton

Employee

Number: \_\_\_\_\_ Department: CMG Rochester

Manager: Kelsey Sikink

Type of Absence Requested:

- |                                   |  |  |   |
|-----------------------------------|--|--|---|
| <input type="checkbox"/> Sick     | <input checked="" type="checkbox"/> Vacation | <input type="checkbox"/> Funeral Leave       | <input type="checkbox"/> Time Off Without Pay |
| <input type="checkbox"/> Military | <input type="checkbox"/> Jury Duty           | <input type="checkbox"/> Maternity/Paternity | <input type="checkbox"/> Other                |

Dates of Absence:

From: 8/30/2024 To: 8/30/2024

Reason for Absence

No childcare for that date. I currently have 34 hours PTO available and will use 8 hours for this date. Thank you.

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

Kelly M Sutton  
Employee Signature

8/20/24  
Date

## Manager Approval

- Approved
- Not Approved

Comments:

\_\_\_\_\_  
Manager Signature Date