



# Request for Time off

## Absence Information

Employee

Name: Kelly

Employee

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

Manager: Kelsey Sikkink

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: 7/1/2022 To: 7/1/2022

Reason for Absence:

*Pick up Mother-In-Law from the airport at 10:30. Off at 10:00*

*Kelly M. Sittler*

*6-24-2022*

Employee Signature

Date

## Manager Approval

- Approved
- Not Approved

Comments:

Manager Signature

Date