

Absence Request

Employee Name	Date
o: Payroll	
I am an: Exempt Employee	Hourly Employee
I will be absent from the office	OR I have been absent from the office (sick)
Date/s:to	to
Number of days:	Number of days:
Number of hours:	Number of hours:
Check one: Vacation /PTO Jury Duty (attach summons)	Sick Bereavement
Other (explain):	Relationship to deceased
Employee's Signature	Date
Supervisor's Signature	Date
Payroll Signature	