REQUEST FOR VACATION / PERSONAL LEAVE

TOWN OF HEATH

ALL VACATION/PERSONAL REQUESTS MUST BE SUBMITTED TO THE BOARD OF SELECTMEN AT LEAST ONE WEEK IN ADVANCE OF LEAVE REQUEST
Note: Emergency circumstances will be considered

Employee _____ Date_____

Date(s) of Request:	Indicate Use of Hours: V=Vacation P=Personal	Total Hours Requested:
_____	___	_____
_____	___	_____

Total Vacation Hours Employee has accrued: _____
Total Personal Hours Employee has accrued: _____

Employee: Submit completed form to your immediate supervisor for approval.

__Approved
__Other_____

_____
Supervisor's Signature (signature required)
(applicable to Highway Dept. personnel)

_____
_____
_____
Board of Selectmen (signature required)
(applicable to non-Highway Dept. personnel)

Approved on _____
(date)

Copy to: Employee
Personnel File