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General Construction & Consulting

Phone 724/229-0119
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Employee Vacation Request Form

Employee
Name: _____

Today's
Date: _____

Vacation Time

Unpaid Time Off

I am requesting the following dates off:

	SUN	MON	TUE	WED	THUR	FRI	SAT
Date:							

	SUN	MON	TUE	WED	THUR	FRI	SAT
Date:							

Notes: _____

Employee
Signature: _____

Date: _____

Manager's Approval

Manager's
Signature: _____

Date: _____

_____ Approved

_____ Not Approved

Notes: _____
