

## Employee Vacation Request Form

An employee requesting time off must submit this completed form to their direct report for approval. If the direct report approves the time they will sign the form and provide a copy of the signed form to the employee and to the Accounting department or General Manager of the property. The Account department or General Manager will then confirm the Pay Period Ending Date for processing at the bottom of the form and send to Head Office for payroll processing.

### EMPLOYEE INFORMATION

Name: \_\_\_\_\_ Employee Number: \_\_\_\_\_  
 Position: \_\_\_\_\_ Department: \_\_\_\_\_

### VACATION DAYS BEING REQUESTED

From (MM/DD/YY): \_\_\_\_\_ To (MM/DD/YY): \_\_\_\_\_  
(first day off work) (last day off work)

### Accrued Vacation Entitlement Available

Accrued vacation (RA) as per the most recent pay period \_\_\_\_\_ (a)  
 Hourly Rate OR Annual Salary / 2,080 hours \_\_\_\_\_ (b)  
 Accrued vacation entitlement in equivalent hours \_\_\_\_\_ (c)=(a)/(b)

### Vacation Entitlement Requested to be Taken

Vacation days being requested requested \_\_\_\_\_ (d)  
 Average hours per scheduled shift \_\_\_\_\_ (e)  
 Vacation entitlement to be taken in equivalent hours \_\_\_\_\_ (f)=(d)x(e)

Accrued Vacation Entitlement Remaining	HOURS	\$
Accrued vacation entitlement available	_____ (c)	_____ (c)x(b)
Vacation entitlement to be taken	_____ (f)	_____ (f)x(b)
Accrued vacation entitlement remaining	_____ (g)=(c)-(f)	_____ (g)x(b)

Special notes: \_\_\_\_\_

### APPROVAL

Employee Signature: \_\_\_\_\_ Date (MM/DD/YY): \_\_\_\_\_  
 Direct Report Signature: \_\_\_\_\_ Date (MM/DD/YY): \_\_\_\_\_

### ACCOUNTING DEPARTMENT / GENERAL MANAGER PROCESSING

Pay Period Ending Date for Processing (MM/DD/YY): \_\_\_\_\_  
 Date Submitted to Head Office (MM/DD/YY): \_\_\_\_\_

