



Request for Leave/Absence Report

Employee Name _____ SSN (last four digits only) _____

Department/Division _____

Leave/Absence will commence on (date) _____ starting at (time) _____

and will conclude on (date) _____ ending at (time) _____

for a total of (hours) _____ or (days) _____

Reason for Leave/Absence

SICK

_____ Employee Only

FMLA

(Family and Medical Leave Act)

_____ Employee Only

_____ On-the-Job Injury/Illness

_____ Family

_____ Military

ANNUAL

_____ Personal

_____ On-the-Job Injury/Illness (after S/L exhausts)

OTHER

_____ Civil Service (On-the-Job Injury)

_____ Family Illness/Injury

_____ Jury Duty (Attach copy of jury summons or other related document)

_____ Administrative With Pay

ADMINISTRATIVE WITHOUT PAY

(City Manager Approval IS NOT Required)

_____ Employee Disciplinary Action

_____ Personal (less than 8 hours)

_____ Other (Please explain below)

ADMINISTRATIVE WITHOUT PAY

(City Manager approval IS Required)

_____ No Leave Balance Available (S/L, Annual, Comp)

_____ Personal (over 8 hours)

_____ Other (Please explain below)

OTHER (cont'd.)

_____ Compensatory Time (Attach copy of Comp. Time Log)

_____ Funeral (spouse, parents, children, siblings, by blood or marriage; not to exceed 3 days)

_____ Military (USERRA)

_____ Miscellaneous (Please explain below)

EXPLANATION

Employee's Signature _____ Date _____

Supervisor's Signature _____ Date _____

For Department/Division Use Only

Is compensation due to employee for leave/absence or any portion thereof? _____ Yes _____ No

Signature (Dept/Division Head) _____ Date _____

Number of hour(s) _____ or day(s) _____ charged to: Sick/Annual/Other (Please circle one) Timekeeper's Initials _____

INSTRUCTIONS Fill out triplicate form: White (original), Pink (copy) and Yellow (copy). Please type or print information clearly. Yellow (copy) shall be immediately sent to the Department of Human Resources. White (original) and Pink (copy) to be retained by Department Timekeeper until employee returns from leave. When the employee returns to work, route to department/division head for information and signature. The Pink (copy) shall be retained in the department/division for reference. The completed White (original) is to be sent to the Department of Human Resources promptly for the Employee's Leave File. The Leave/Absence report **must** correspond with the Payroll/Time Sheet entries.