|  |  |
| --- | --- |
| **Name:** |  |
| **Date Submitted:** |  |
| **Supervisor:** |  |
| **Location/Department:** |  |
| **Date(s) Taken:** |  |
| **Reason:** |  |
| **Number of days taken so far this year:** |  |
| **Number of days left available:** |  |

*\*\*\*Please note, as outlined in the Leave Policy, employees who were hired before 2009 are entitled to 10 paid sick/personal days a year and employees hired since 2009 are entitled to 5 paid sick/personal days per year. In addition, paid days are only available after you have completed your 6-month probationary period.\*\*\**

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| --- | --- | --- | --- |
| Employee Signature: |  |  | Date: |
| Supervisor Signature: |  |  | Date: |
| Senior Manager Signature: |  |  | Date: |
| HR Signature: |  |  | Date: |