

Employee Paid Time Off Request Form

			JANUARY	FEBRUARY	MARCH
NAME:	PTO Beginning of 2017 :		Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat
			1 2 3 4 5 6 7	1 2 3 4	1 2 3 4
			8 9 10 11 12 13 14	5 6 7 8 9 10 11	5 6 7 8 9 10 11
			15 16 17 18 19 20 21	12 13 14 15 16 17 18	12 13 14 15 16 17 18
			22 23 24 25 26 27 28	19 20 21 22 23 24 25	19 20 21 22 23 24 25
			29 30 31	26 27 28	26 27 28 29 30 31
AVAILABLE PTO:	Remaining PTO After:				
			APRIL	MAY	JUNE
			Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat
			1	1 2 3 4 5 6	1 2 3
			2 3 4 5 6 7 8	7 8 9 10 11 12 13	4 5 6 7 8 9 10
	Circle the dates you have taken PTO on the calendar		9 10 11 12 13 14 15	14 15 16 17 18 19 20	11 12 13 14 15 16 17
			16 17 18 19 20 21 22	21 22 23 24 25 26 27	18 19 20 21 22 23 24
		25 26 27 28 29 30			
			30	_	
			JULY	AUGUST	SEPTEMBER
Your request for time off must be submitted and approved by management in advance. You may request			Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat
			1	1 2 3 4 5	1 2
time off throughout the year. When more than one employee has requested the same time and when this			2 3 4 5 6 7 8	6 7 8 9 10 11 12	3 4 5 6 7 8 9
			9 10 11 12 13 14 15	13 14 15 16 17 18 19	10 11 12 13 14 15 16
would make it difficult to provide quality service or meet projected schedules, requests will be considered in the order in which they are received. Every effort will be made to honor your time off request. Business			16 17 18 19 20 21 22	20 21 22 23 24 25 26	17 18 19 20 21 22 23
			23 24 25 26 27 28 29	27 28 29 30 31	24 25 26 27 28 29 30
			30 31		
operations may dictate that the employee reschedule his/her time off.			OCTOBER	NOVEMBER	DECEMBER
	·		Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat	Sun Mon Tue Wed Thu Fri Sat
Discretions and in the second DTO also is a /a\ in the		1 2 3 4 5 6 7	1 2 3 4	1 2	
Directions: Indicate your PTO choice(s) in the space(s) below. Sign, date and forward to your supervisor for			8 9 10 11 12 13 14	5 6 7 8 9 10 11	4 4 5 6 7 8 9

Holiday Schedule

Date Submitted	Start Date	End Dated	Employee Signature	Manager Signature	Approved	Balance

approval.