



## Paid Time Off (PTO) Request Form

Revised 09/05/2019

### ----- EMPLOYEE SECTION -----

Employee name: \_\_\_\_\_ Date: \_\_\_\_\_

PTO Dates requested: \_\_\_\_\_

Are any of the dates requested directly before or after a paid holiday? \_\_\_\_\_

Is this PTO request for? (check box)  Scheduled  Unplanned

If time off was unplanned, list reason: \_\_\_\_\_

Total hours requested: \_\_\_\_\_

Total hours available: \_\_\_\_\_

Employee signature: \_\_\_\_\_

### ----- SUPERVISOR SECTION -----

List any other members of your team that may be unavailable on the requested dates:

\_\_\_\_\_

Do you have adequate manpower and coverage plans for requested days? \_\_\_\_\_

Do you recommend approval of this request? \_\_\_\_\_

Supervisor's signature & date: \_\_\_\_\_

### ----- OFFICE MANAGER & DIRECTOR SECTION -----

Office Manager's confirmation of available hours: \_\_\_\_\_

Director's final approval signature & date: \_\_\_\_\_

Director's comments: \_\_\_\_\_

Office Manager's employee approval/denial notification:

Supervisor \_\_\_\_\_

Employee \_\_\_\_\_