



4600 South Redwood Road / PO Box 30808 / Salt Lake City, Utah 84130-0808

Telephone (801) 957-4969 / Fax (801)957-5943

CUSTODIAL DEPARTMENT TIME OFF REQUEST

NAME:

BANNER ID:

DEPARTMENT:

YEAR:

		MON	TUES	WED	THURS	FRI	SAT	SUN
MONTH:	DATE:							
Sick								
Vacation								
Personal Hours (Hourly Employees)								
Jury Duty								
Funeral Leave								
Short Term Military Leave								
Family Medical Leave (Sick)								
Family Medical Leave Without Pay								
Leave Without Pay								
Other:								

Additional Information:

Signature of Employee _____ Date _____

Signature of Supervisor _____ Date _____