

Employee Leave Request Form



EMPLOYEE INFORMATION

Name: _____ Position: _____

Manager: _____ Position: _____

Department: _____ Date of Request: _____

LEAVE INFORMATION

Start Date: _____ End Date: _____

Back in Office Date: _____ Total Days Requested: _____

Type: Vacation TOIL Personal Study Will You be Leaving The Island? Yes No

If Applying For Personal Leave or if Leaving The Island, Please Provide Details Here:

LEAVE BENEFIT SUMMARY AND AUTHORIZATION SIGNATURES

VACATION ALLOWANCE

Total Vacation Allowance For The Year Inclusive of Carry Over Allowance: _____

Total Vacation Allowance Already Used or Scheduled For The Year: _____

Current Vacation Allowance Balance: _____ Remaining Days After This Request: _____

TIME IN LIEU

Outstanding TOIL Balance: _____ TOIL Balance After This Request: _____

PERSONAL LEAVE BENEFIT

Personal leave allowance is determined through the CBA based on the reason provided in the "Leave Information" section. Examples of CBA categories that this may reference are: "Personal Leave"; "Compassionate Leave"; "Special Leave"; "Military Leave"; and so on.

Personal Leave Allowance: _____ Personal Leave Balance After This Request: _____

STUDY LEAVE

Study leave allowance is awarded by Management at their discretion.

LEAVE AUTHORIZATION SIGNATURES

Employee Signature: _____ Date: _____

Manager Signature: _____ Date: _____

General Manager Signature: _____ Date: _____

HUMAN RESOURCE USAGE

This section is for Human Resource usage only.

Conflict Details, if Any:

Any Other Notes:

Human Resource Manager Signature: _____ Date: _____