



Vacation Request Form

Date: ____/____/____

Name: _____

Vacation Dates Requested: ____/____/____ through ____/____/____

Total Number of Hours Requested: ____ Hours

Comments _____

Employee Signature _____ Date _____

Approval:

Supervisor Signature _____ Date _____

Manager Signature _____ Date _____

This request must be submitted to HR three weeks prior to leave. Any absence not properly approved will be treated as an unexcused absence and disciplinary action will be taken. A & K reserves the right to deny requests based on business needs.