

REQUEST FOR DAY (S) OFF

(must be submitted a minimum of 14 days before date requested)

THIS IS ONLY A REQUEST

(Do not assume the time off has been granted without your Sales Managers approval.)

Name: _____ Store: _____ Date: _____

Your position: Mgr MIT Exec Cons. Sr. Cons. Formal Cons.

Day (s) requesting off: Mon Tues Wed Thurs Fri Sat Sun

Date(s): _____

Notified your Manager: Yes, if so, is it signed? No

Reason:

Has anyone else asked for the same day (s) from your store? Yes No

If so, who and when? _____

Manager comments: _____

Office Use Only
Approved By:

Print and get signed by your Manager

Manager: Email to Sales Manager

Sales Manager: Email final to Main Office