Lincoln University Request For Leave



			1				
	ION 1 – EMPLOY	EE USE					
□ NEW □ REVISED			Date Submitted:				
Name -Type or Print Clearly			Datatel #				
Employe	ee Signature		Der	partment Name	.		
	son for Absence:	1					
(□) Vacation			(□) Other (Please Indicate #)				
	Sick Leave Personal Leave	·	1. University Business 2. Jury Duty* 3. Mili			3. Military Duty*	
Leng	qth of Leave:		EAVE TYPE (Diago Chook /	Annuanciata Bay		
	Date	Hours Used	Vacation	Sick	Appropriate Box) Personal	Other#	
	Date	110010 0000	Vacation	Olok	1 01001141	<u> </u>	
	Total Hours						
• 1	MENTS: Please submit origi Resources.	inal leave form(s) within a <u>wee</u>	<u>ek</u> following th	e date leave is ta	aken to Human	
	n supporting Docu onal leave can be u				nal business.		
SECT	ION II – DEPARTM	IENTAL USE:					
(□) Insi	Revie ufficient time accru	w Attendance Sเ เed	ummary Report		ROLL INFORMA	TION	
(□) Approved				((□)Without Pay		
	approved			(_	,,		
	αρρισν ε α			Suparvisa			
				Superviso			
				Departme	ent Head		