



TIME OFF REQUEST FORM

Contractor Name: _____

Instructions:

Select the appropriate box below as it pertains to your request.

- As a contractor you are allowed only 5 paid days off with pay after the probationary period.
- Requesting time off means that we will not work even remotely during this time, and you are asking for someone else to perform your job duties during your absence
- If you initially only anticipate being out less than 3 days and something changes, you are required to complete this form on or before the 5th day, otherwise, you may forfeit your right to paid time off, if requested
- Requested days must run consecutively, a day here or there is not considered time off
- If your time out continues past the below indicated dates, you must submit another time off form

☐ Time Off (Without Pay) – *5 or more days*

Number of days requested: _____ - Leave Date: _____ Return Date: _____

☐ Time Off (With Pay) – *5 or more days (only the first 5 days are payable)*

Number of days requested: _____ - Leave Date: _____ Return Date: _____

Contractor Signature: _____ Date: _____