



## PERSONAL TIME OFF REQUEST

_____	_____
<b>Employee Name</b>	<b>Social Security Number</b>

_____	_____	_____	_____
<b>Start Date</b>	<b>End Date</b>	<b>Return Date</b>	<b>Number of Days</b>
<b>Explain:</b> _____			
_____			
_____			
_____	_____		
<b>Employee Signature</b>	<b>Date</b>		

_____	_____
<b>Magna Approval</b>	<b>Date</b>

<b>Office Use Only</b>		
<b>Was Absence</b>		
<b>Expected in Advance</b>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No
<b>Reported on First Date absent</b>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No
<b>Considered by Supervisor</b>	<input type="checkbox"/>	<input type="checkbox"/>
	Excused	Unexcused