CUNY SCHOOL OF LAW

Law in the Service of Human Needs

REQUEST FOR ANNUAL LEAVE

Employee Name		Title	Department	
Informat	ion & Instructions			
 This form must be submitted to your supervisor in advance (two weeks notice preferred) for any leave request. Two weeks notice is required for four or more days. Should you not have sufficient leave balances you will be notified by Human Resources. 				
		1 and ends on August 31. Only with prior writter eave be accumulated over the annual leave cap.	n approval of the Dean of	
Available Vacation Days		As Of L	As Of Date	
MONTH	DATES		No. Of Days	
Septembe	er			
October				
Novembe	r			
Decembe	r			
January				
February				
March				
April				
May				
June				
July				
August				
Employee Signature		Date		
Supervisor Signature APPROVED		Date □ APPROVED / □ DENIED		
Ции	aan Racourcas Dasignaa Signatura	APPROVED / DENIED		



□ APPROVED / □ DENIED