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**REQUEST FOR PERSONAL TIME OFF**

Phone: 626.335.4081    Fax: 626.914.4711    Email: [Serviceteam@geainc.com](mailto:Serviceteam@geainc.com)

**Instructions: The employee is to complete the upper half of this form and have his/her supervisor approve or deny the request. The original form is to be returned back to Glendora Employment Agency, Inc.**

Employee Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company Assigned: \_\_\_\_\_

Signature of Employee: \_\_\_\_\_

This is a personal request for time off from \_\_\_\_\_ to \_\_\_\_\_

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Request has been:    Approved \_\_\_\_\_    Denied \_\_\_\_\_    Date: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Will you need a replacement person during the above stated dates?    Yes     No

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_