



Summerfield Peace United Methodist Church, Inc.

TIME OFF REQUEST

Name: _____

Position: _____

Signature: _____

Date: _____

VACATION REQUEST

Employees are entitled to no paid vacation the first year of employment. After completion of one full year of continuous employment (as measured by the employee's hire date), employee will receive one week of paid vacation. Vacation days will be accrued at the rate outlined in the employee lay policy.

Please submit a request for vacation as soon as you are aware. All requests are due to the SPRC Chair at least two weeks in advance for proper approval. Every effort will be made to grant your request; however, time off can not interfere with the operations of the church and therefore must be approved in advance. If any conflicts arise in the request, preference will be given to the first employee who requests the time off. Except in the instance of illness or emergency, all time off must be scheduled in advance.

UNPAID LEAVE REQUEST

If you have no vacation time accrued or if you've already used your vacation time, you may request time off with the understanding that you will not be paid during this time.

Date(s) requested: _____

Total Number of days: _____

Type of Time off requested (please check one and describe if other):

Vacation Unpaid Leave Other: _____

The following are paid holidays for all employees of Summerfield Peace United Methodist Church, Inc.:

New Year's Day

Memorial Day

Thanksgiving

Martin Luther King Day

July 4th

Christmas Day

Good Friday

Labor Day

FOR OFFICE USE ONLY

Date submitted: _____

Number of Days approved: _____ Vacation _____ Unpaid _____ Other

Substitute assigned for request, if applicable: _____

Request Denied: _____ Reason: _____

Approving Signature: _____

Date: _____