



Leave Adjustment Request

Please indicate appropriate changes below

Submit completed form to Human Resources

Employee Name _____

Date _____

Employee's Signature _____

Employee ID _____

Original Leave Request			Change Required			
			<i>Cancel Request</i>	<i>Edit Request</i>		
Specify: Personal Leave or Vacation	Date(s)	Hour(s)		Specify: Personal Leave or Vacation	Date(s)	Hour(s)

Supervisor's Approval _____

Date _____