



College of Natural & Behavioral Sciences • Office of the Dean - LIB C502

Carson, CA 90747-0001 • (310) 243-2547

Request for Approval of Vacation Time

Please print information

Name	
Department	
Immediate Supervisor	

Vacation Days Requested: One Pay period (month) per form

From		To		# of Days	
From		To		# of Days	
From		To		# of Days	
From		To		# of Days	

Provisions made for covering responsibilities while on vacation:

Employee Signature

Date

APPROVAL

Immediate Supervisor Signature

Date

Recommend Do not recommend

Dean or Designee Signature

Date

Approved Not Approved

Comments: _____