

VACATION REQUEST FORM

Please return this form to the Hall using one of the following:

1. Email, admin@glaziers513.org
2. Mail it USPS
3. Drop it by in person

Please note that requests must be received by 4pm on Tuesday in order for any eligible checks to be written the same week.

Date: _____

Employee Name: _____

Company Name: _____

Vacation Dates Requested: ___/___/___ through ___/___/___

OR

Individual Days Requested: ___/___/___ ___/___/___ ___/___/___ ___/___/___ ___/___/___

Total # of Days Requested: _____

Please circle how you would like to receive your check: Mail It / Pick It Up

(Signature)

(Date)

Please note the following conditions for Vacation Check Requests:

1. 2 weeks of vacation may be taken in increments of 1 day at a time. A vacation check will be issued after the 5th day has been taken.
2. The other 2 weeks must be taken in weekly increments (5 consecutive days). Holidays can not be included as a vacation day. Checks for weekly increments can be written 30 days prior to the vacation dates.
3. All vacation checks will be issued at the weekly rate outlined by your Journeyman status as of July 1st of the current plan year.
4. Any check requests outside of these parameters must be submitted to the Vacation Committee for approval.