APPENDIX G

VALLEY VIEW COMMUNITY UNIT SCHOOL DISTRICT 365U

VACATION REQUEST FORM

Supportive Staff Employee vacation requests must be filed at least thirty (30) calendar days prior to the anticipated vacation.

Vacation time can be divided or split during the twelve (12) month period.

I request my vacation of _____ days for the following twelve month period from:
(Number)

_____ Thru _____
Month Day Year Month Day Year

_____ Thru _____
Month Day Year Month Day Year

_____ Thru _____
Month Day Year Month Day Year

CHECK ONE:

☐ I desire that my total vacation pay, if possible, be paid to me on my last working day before my vacation period begins.

☐ I desire my vacation pay be paid to me on the last regular scheduled pay day before my vacation period begins.

_____ _____
(Date) (Employee's Signature)

_____ _____
(Date) (Principal/Assistant Principal)

_____ _____
(Date) (Received by BOM)