

RELOO

REILLY ELECTRICAL CONTRACTORS, INC.

TIME-OFF REQUEST FORM

Submit all requests to: HR@GORELCO.COM

Your request for time off must be submitted to HR@GORELCO.COM a minimum of 2 weeks in advance of the first day requested.

All time off will be approved on a first come, first serve basis based on scheduling and operational requirements.

For all employees to have an opportunity for a vacation during the summer months, no one will be approved for more than one week's vacation time (5 consecutive days) during the months of May thru September. All summer vacation requests must be received in advance with a minimum 4-week notice. Requests will be granted on a first come, first serve basis.

Name: _____ Today's Date: _____
(PRINT PLEASE)

Type of Request:

- Vacation Time Paid Vacation Time Unpaid Jury Duty
- Sick Time Paid (paid through vacation time) Sick Time Unpaid

Dates Requested: *For summer vacation requests please list an alternative date in case your 1st request is not available*

Date(s): _____ Total number of hours requested: _____

Date(s): _____ Total number of days requested: _____

Alternative Date(s): _____

NOTES: _____

Employee Certification:

- ✓ I understand that time away from work is subject to management approval and company policies.
- ✓ All time off requests must be submitted via email to HR@GORELCO.COM at least 2 weeks in advance (a minimum 4-week notice is required for summer months of May – Sept).
- ✓ All requests are granted on a first come first serve basis.
- ✓ Time off for reasons allowable under the sick time policy (i.e., doctor appt., etc.) must be requested when the appointment is made and given as advance notice as possible.
- ✓ I understand that I will only be paid for what vacation time I have accrued. *
- ✓ Emergency time-off will be handled on a case by case scenario.

I agree with the above certification: _____: Date: _____

Approval: *Foremen are not authorized to approve requests for time off.*

APPROVED: YES NO

***Vacation Time Available:** _____

Supervisor/Manager Approval: _____ Date: _____