



Employee:

Date Submitted:
I REQUEST LEAVE FOR THE FOLLOWING DATES: (only actual work days requested off)
From/ To/
Total Day's Requested:
DAYS OF WEEK ABSENT:
SunMonTuesWedThurFriSat
SunMonTuesWedThurFriSat
REASON FOR LEAVE:
Vacation Conference Missions Comp
Sick Leave Funeral Revival
EXPLANATION:
Total Leave Days for Year: Total Sundays For Year
Total Leave Days Remaining: Total Sundays Remaining:
Employee Signature: Date/

Supervisor Signature: ______ Date ____/____

Leave Denied _____ Comments: ____

Choctaw Road Baptist Church 1497I E Reno Ave. Choctaw, OK 73020

