

The Adjutant General's Department
State Employee's Electronic Leave Request Form

EMPLOYEE NAME:

Payroll End Date:

Employee Must Obtain Approval Prior To Taking Leave

Type - Use Code	Pre-Sched? Yes/ No	Reason* * Reason required except for pre-scheduled vacation leave or comp time.	From	To	Total Hrs. used	Sup Approval Result

Comments:

** Employee's signature acknowledges and agrees that hours approved may be modified

Employee Signature:

Supervisor's Signature:

Please scan and attach any documentation needed (i.e. Dr. Notes, Military Orders, etc.) to the e-mail when sending this for approval to your supervisor. Supervisors should forward the attachments to HR along with approved leave request.