

SCC Cleaning Company Inc.

Time Off Request

I, _____, hereby request the following days off for:

Check One

- Birthday
- Funeral
- Jury Duty
- Leave of Absence
- Sick
- Vacation
- Other _____

From: _____ To: _____

I understand that the above requested time is subject to approval by my supervisor and may need to be changed. I also understand that if the time I have listed above is extended I will notify the home office, 1-800-472-1007, immediately.

NOTE: Vacation time must be submitted in writing two to three weeks prior to requested dates off. SCC Cleaning Company, Inc. reserves the right to review all submitted dates. Alternate dates may need to be considered for scheduling purposes. Vacation Request forms may be obtained from your immediate supervisor.

Employee Signature:

Date:

Managers Signature:

Date: