

FLEX-TIME REQUEST FORM



To be used for requests to take flex-time entitlement in excess of 2 hours

TO:

FROM:

DATE:

I would like to take the following day(s)/part day(s) as flextime:

Date AM	Date PM	Date Whole Day

Amount of time in credit before the above request:

Signed by Employee:

PRINTED:

Date:

Approved? YES / NO

Reason for not approving request:

.....

Signed by Manager:

PRINTED:

Date: