



Oakwood University Vacation Request



Name: _____

Date: _____

ID number: _____

Department: _____

PLEASE INDICATE YOUR VACATION PREFERENCES AS FOLLOWS:

1ST Choice: From - _____ to _____

2nd Choice: From - _____ to _____

3rd Choice: From - _____ to _____

Total Vacation Hours Requested: _____

In case of an emergency I can be contacted at: (_____) _____

Employee Signature: _____

HUMAN RESOURCES

The above-named employee has a balance of _____ vacation hours as of today.

Employee Services' Signature

Date

SUPERVISOR'S APPROVAL/DENIAL

Approved for _____ Choice

Denied (See Comments)

Comments: _____

Supervisor's Signature

Date

Division Administrator (where applicable)

Administrator's Signature

Date