



## TIME & LEAVE BALANCE REQUEST

NAME \_\_\_\_\_

DATE: \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

TITLE \_\_\_\_\_

EXT \_\_\_\_\_

I am requesting a summary of all my current Leave Balances. All of my timesheets have been submitted to the HR Office.

The turnaround time is 2 Business Days.

### FOR OFFICE USE ONLY

Time & Leave as of \_\_\_\_\_

#### ACCRUAL RATES

Annual Leave \_\_\_\_ D \_\_\_\_ H \_\_\_\_ M

A.L. Monthly Accrual Rate \_\_\_\_ D \_\_\_\_ H \_\_\_\_ M

Sick Leave \_\_\_\_ D \_\_\_\_ H \_\_\_\_ M

S.L. Monthly Accrual Rate \_\_\_\_ D \_\_\_\_ H \_\_\_\_ M

Unscheduled Holidays \_\_\_\_\_

Annual Leave Cap \_\_\_\_\_

Compensatory Time \_\_\_\_\_

A.L. Yearly Accrual \_\_\_\_\_ D

Date Sent \_\_\_\_\_

S.L. Yearly Accrual \_\_\_\_\_ D

Completed by: \_\_\_\_\_

\* **D= Day/s**    **H=Hour/s**    **M=Minutes\***

Request Made: Phone\_\_\_\_ / Email \_\_\_\_ / By Supervisor \_\_\_\_ / In Person \_\_\_\_