



NORTHERN OKLAHOMA COLLEGE
ANNUAL LEAVE REQUEST FORM

NAME: _____ POSITION: _____

REQUESTED LEAVE DATES:

1ST DATE OF LEAVE: _____ LAST DAY OF LEAVE: _____

TOTAL LEAVE HOURS REQUESTED: _____ (# OF HOURS)

Vacation time accrues as follows:

Table with 4 columns: YEARS OF SERVICE COMPLETED, ANNUAL LEAVE ACCRUAL RATE FOR FULL MONTH OF WORK, ACCRUAL RATE PER YEAR, MAXIMUM ACCRUAL. Rows include 1/5, 6/10, and 11 --.

Annual leave will be accrued according to the above schedule up to maximum accrual. Annual leave in excess of the maximum accrual limit will be forfeited. No more than the maximum accrual of annual leave can be utilized during any fiscal year.

In order to accommodate all employee leave requests, LEAVE REQUESTS MUST BE APPROVED BY THE SUPERVISOR AND VICE PRESIDENT OF FINANCIAL AFFAIRS AT LEAST 15 DAYS PRIOR TO THE BEGINNING OF THE LEAVE.

TO BE COMPLETED BY THE PAYROLL OFFICER:

ACCRUED ANNUAL LEAVE: _____ HOURS AS OF: _____

BALANCE IF ANNUAL LEAVE AVAILABLE AFTER THE APPROVED LEAVE HAS BEEN TAKEN:

BALANCE: _____ HOURS AS OF: _____

EMPLOYEE'S REQUEST: _____

SUPERVISOR'S APPROVAL: _____

VICE PRESIDENT OF CAMPUS APPROVAL (IF APPLICABLE): _____

VICE PRESIDENT OF FINANCIAL AFFAIRS APPROVAL: _____