PTO REQUEST FORM

Created by: Cliff Rodgers **Approved by:** Joe Castro 11/26/2008

Requesting Time Off

All field employees are required to submit requests for time off. This is absolutely necessary in order for Operations to put together the manpower schedules.

Hourly Personnel (no computer access)
Supervisor should download PTO Request form from Retro-Tech Web site for employees who do not have computer access or a password to the Web Site.

Supervisors and Managers should get all forms from the Web Site as they are frequently changed based on your input.

Supervisor should print the manual form (second page) and give it to employee to complete and sign. This form is designed to be completed by hand for those employee without computer access.

Supervisor should fax completed handwritten form to **both** Greg Castro and Joe Castro. An alternative to this would be for the Supervisor to scan the signed document and e-mail it to **both** Greg and Joe.

Managers and Supervisors (computer access)

Managers and Supervisor with computer access and Web Site password should download the PTO Request form from Retro-Tech Web site.

Supervisors and Managers are required to complete their PTO Request forms electronically and apply their digital signature.

Supervisors and Managers are required to e-mail completed, digitally signed PTO Request forms to **both** Greg Castro and Joe Castro.

Vacation Approval

Greg Castro must approve all field employee requests for time off. Greg will approve the request via e-mail response. Greg will copy Joe Castro on the approval e-mail. Joe Castro will digitally sign the form, thus documenting the approval and file it in the approved vacation folder.

Vacation Schedule

Joe will enter the employee's approved time off into the Field Employee Vacation calendar in GroupWise.

Clear Form | E-mail as an Attachment

RETRO-TECH SYSTEMS, INC.

REQUEST FOR TIME OFF

☐ Change

(This form can be used for both HOURLY and SALARIED Employees)

Employee Name: _____ Department: _____

Title: - Hourly or Salaried: -

Type of Time Requested: - Date: _____

Project: _____

DATES INVOLVED

(List below the number of regularly scheduled hours you will be absent)

Week Beginning Month/Day/Yr	Sunday Hours	Monday Hours	Tuesday Hours	Wednesday Hours	Thursday Hours	Friday Hours	Saturday Hours
	☐ Check this box if you are uncertain of your return date						

Total Hours: 0.00 Total Days: 0.00

Employee Comments;

✖ _____ _____

Employee Signature Date

☐ NOT APPROVED ☐ Approved AS IS ☐ Conditional Approval (see comments)

✖ _____ _____

Approval Signature Date

Approval Comments: ☐ Entered in Vacation Calender ☐ Entered in Tracking Sheet

REQUEST FOR TIME OFF

☐ **Change**

(This form can be used for employees with no computer access)

Employee Name: _____ Department: _____

Title: _____ ☐ Hourly ☐ Salaried

Type of Time Requested: ☐ Vacation ☐ Bereavement ☐ Personal Time Off

☐ Jury Duty ☐ Unpaid Leave of absence

☐ Other _____

Project: _____

DATES INVOLVED

(List below the number of regularly scheduled hours you will be absent and the appropriate code)

Week Beginning	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Month/Day/Yr	Hours	Hours	Hours	Hours	Hours	Hours	Hours
	☐ Check this box if you are uncertain of your return date						

Total Hours: _____ Total Days: _____

Comments:

_____

_____

_____

_____

_____

_____

✖ _____ _____

Employee Signature Date

Hand-written forms can be submitted to supervisors/managers but data must still be entered in the appropriate request form by that supervisor or manager, and digitally signed. One copy of the Digitally signed request is returned to the employee. The digitally signed request must also be e-mailed to Joe Castro and Cliff Rodgers for record keeping purposes.