

## Southington Public Schools

## 200 North Main Street

## Southington, CT 06489

#### **REQUEST AND DATE CHANGE FORM**

 **WORK DAYS / VACATION & NON-WORK DAYS**

***This form is used for multiple groups to assist the HR and Payroll departments in tracking work days (for administrators), vacation days (for non-certified staff), and non-work days (for administrators at central office).***

|  |  |
| --- | --- |
| **Date:** |       |
| **Employee:** |       |
| **Department/School:** |       |

**PART I**

**Complete and submit to the HR office by July 1. Keep copy for your records.**

|  |
| --- |
| **[ ]  WORK DAYS (215 = 9, 227 = 21)** **[ ]  VACATION/NON-WORK DAYS** |
| **Date(s) ~** *please include consecutive dates in one cell* |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |

**PART II**

**Only complete this section if you are notifying the HR/Payroll offices of a change to a date that was previously submitted.**

|  |
| --- |
| **[ ]  WORK DAY [ ]  VACATION/NON-WORK DAY** |
| **Date that was originally submitted** | **Replacement Date** |
|       |       |
|       |       |
|       |       |
|       |       |

|  |  |
| --- | --- |
| **# of Work Days or Vacation Days Listed Above:** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of Employee:** |       | **Date** |       |

**Approvals:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Immediate Supervisor** |       | **Date** |       |

***Please return the original to the Human Resource Office.***

**Office use:** **[ ]  Copy to Payroll [ ]  Admin Calendar [ ]  Personnel File**