

BROOKLYN COLLEGE

WHITE COLLAR CLASSIFIED STAFF
APPLICATION FOR ANNUAL LEAVE

INSTRUCTIONS: This form is to be used in requesting 4 days or more annual leave and is to be completed by staff member and reviewed by Chairperson or Supervisor at least (2) weeks prior to desired time off, forward the Office of Human Resources. If the application is not approved, the employee and the supervisor will be advised by the Office of Human Resources.

Name _____ CUNYfirst Empl ID # _____

Department _____ Title _____

I hereby apply for Annual Leave for the period:

From _____ To _____

Signature _____ Date _____

Recommendation of:	<u>Approved</u>	<u>Disapproved</u>	<u>Signature</u>	<u>Date</u>
Chairperson/Supervisor	_____	_____	_____	_____
Additional Approval*	_____	_____	_____	_____
Personnel Officer	_____	_____	_____	_____

FOR COLLEGE PERSONNEL OFFICE USE

Total leave days on record to date: _____

Total leave days to be used: _____

Annual leave days remaining: _____

Signature: _____ Date: _____

Title: _____

* Additional approval may be required by the college.