Williamson County Clerk's Office Leave Request Form:

(ONE PER PAYROLL PERIOD for overlapping absences)

Vacation time to be taken in whole hour increments & requested in writing ONE WEEK IN ADVANCE

Name (Print Name):	Terri Countess
I am requesting: (Check one)	
☐ Vacation (Paid Time Off)	☐ Floating Holiday (Personal, business, house or car repair emergencies)
Sick Leave (Check applicable boxes below Called in sick to Nancy and S Scheduled appointment Doctor's note attached Bereavement Leave (Granted for death of: spouse, parent, child, sibling, grandparent, aunt, uncle, parent-in-law, sibling-in-law)	☐ Family member illness (Self or immediate family only
☐ Flex Time (See below)	
For the following timeframe: July 18, 2017 (Month/day(s)/year)	rom 8:45am (am/pm) thru 5:00pm (am/pm) (time)
	Flex Time Schedule
(I will make up	hours by working the following additional time)
Friday	fromam/pm toam/pm
Monday	fromam/pm toam/pm
Tuesday	fromam/pm toam/pm
Wednesday	fromam/pm toam/pm
Thursday	fromam/pm toam/pm
Employee Signature: Jem Conn	Tosa Date: 7/18/17
Supervisor's Approval:	Added to calendar
☐ Approved By (Initials/Date)	s to be filled out by Nancy E. Rister