**Vacation Leave Request Form (Planned Vacation)**

**Employee Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name:** |  | **Employee ID:** |  |
| **Department:** |  | **Position/Title:** |  |
| **Supervisor/Manager:** |  | **Contact Number:** |  |
| **Email:** |  |  |  |

**Vacation Leave Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Leave:** | ☐ Vacation Leave (Planned) | **Reason for Leave (Optional):** |  |

**Vacation Dates Requested**

|  |  |  |  |
| --- | --- | --- | --- |
| **Start Date:** |  | **End Date:** |  |
| **Total Number of Vacation Days:** | |  | |

**Vacation Plan Confirmation**

|  |  |  |  |
| --- | --- | --- | --- |
| **Have you completed all pending tasks?** | ☐ Yes ☐ No | **Have you arranged coverage for your duties?** | ☐ Yes ☐ No |
| **If Yes, Name of Substitute/Covering Employee:** |  | | |
|  | | |

**Employee Declaration**

I hereby request approval for the vacation dates stated above and confirm that the provided information is accurate.

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor/Manager Review**

|  |  |  |  |
| --- | --- | --- | --- |
| **Leave Balance Available:** |  | **Leave Approved:** | ☐ Yes ☐ No |
| **Comments:** |  | | |
|  | | |
|  | | |
| **Supervisor/Manager Signature:** |  | | |
| **Date:** |  | | |

**HR Department Use Only**

|  |  |  |  |
| --- | --- | --- | --- |
| **Leave Recorded in System:** | ☐ Yes ☐ No | **HR Representative:** |  |
| **Date:** |  |  |  |

**Notes:**

* This form should be submitted at least **two weeks prior** to the planned vacation dates.
* Approval is subject to workload, staffing needs, and company policy.