

RANDOLPH COLLEGE VOLUNTARY TIME-OFF WITHOUT PAY	
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Employee Name	
S.S. #	
Status	Exempt Non-Exempt
Department	
Supervisor	
Dates Requested	<i>Must be complete days</i>

Note: Each request for *Voluntary Time-Off Without Pay* will be evaluated on an individual basis, taking into consideration length of service, work record, and staffing needs. To qualify for voluntary time-off without pay, the staff member must have completed at least three months of service at the time of the request. *It is important that Personnel Services be involved in approving all leaves to ensure there is continuity in how these leaves are granted.*

I understand that I am taking these days off without pay and that the forfeited amount will be subtracted from my next paycheck. With this deduction in pay, some employee benefits may need to be adjusted. Sick and vacation accruals will stay the same and will be evaluated should the temporary time-off become a permanent schedule adjustment.

_____ **Employee Signature** _____ **Date**

_____ **Supervisor Approval** _____ **Date**

_____ **Human Resources Approval** _____ **Date**

FOR PAYROLL USE:

Hours requested: _____ **Total Deduction:** _____

Hourly rate: _____ **Keyed by:** _____