

Wayne County Board of Education

**Vacation
Off Work
Outside School Environment
Request Form**

Date: _____

I, _____, request that I be granted the following days: (Circle one and list dates requested)

Vacation _____

Off Work _____

Outside School Environment _____

Employee Signature

Employee ID #

Payment Recommended
Supervisor Signature

Job #

ONCE FORM IS COMPLETED AND APPROVED, PLEASE GIVE COPY TO MICHELLE FOLLOWAY