



# Calgary Progressive Lifestyles Foundation

*Providing Services for Citizens with DisAbilities*

## Vacation Pay Request Form

Submitted Date: \_\_\_\_\_

Name of Person requesting Vacation Pay: \_\_\_\_\_

Vacation Pay in Full: Yes  No

Vacation Pay amount being requested:

\_\_\_\_\_

Employee: \_\_\_\_\_

Date: \_\_\_\_\_

Signature

For Internal Use Only

Vacation Pay

Amount Paid Out: \$ \_\_\_\_\_

Finance: \_\_\_\_\_

Date: \_\_\_\_\_

Signature