



Town of Oro Valley

Leave Without Pay Request Form

Refer to Personnel Policy 10, Section 10.4, Leave of Absence without Pay for additional information.

Please complete this form and provide to your supervisor. The form should then be routed in the order of signatures listed below and returned to Human Resources. If denied, please return immediately to HR. HR will notify the employee, Department Director and Payroll of approval or denial.

Employee Name:		Department:	
Date(s) Requested:			
Total Number of Unpaid Hours Requested:			
Reason for request:			

Employee Signature

Date

I Grant Leave Without Pay (or enter denial and signature in comment box below):

Department Director Signature

Date

Human Resources Director Signature

Date

Town Manager Signature

Date

Leave Denial Information / Name /Signature:

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Oro Valley, it's in our nature.