



REQUEST FOR A VOLUNTARY FURLOUGH

The purpose of the Voluntary Furlough Program is to provide eligible employees with the opportunity to take unpaid leave time while maintaining seniority and benefits. Please refer to Policy No. H.05.01 for specific information relating to the Voluntary Furlough Program. In brief, furlough may be taken so long as there is no increase in overtime costs or the need to backfill a position. Voluntary furlough, which is leave without pay, may be used for any purpose except for sick leave, leave without pay due to disability, or to seek or engage in alternative employment, and it must be approved by your supervisor and your departmental vice president. For questions relating to the Voluntary Furlough Program please contact Randy Graham, Associate VP of Human Resources at extension 3813.

EMPLOYEE NAME: _____

TITLE: _____

DEPARTMENT: _____

FURLOUGH DATES REQUESTED (For a single or consecutive days): _____

FURLOUGH DATES REQUESTED (For intermittent or shortened days): _____

Total number of requested days: _____ or Total number of requested hours: _____

Reason for requesting furlough: (ex: family care needs, to extend a vacation, to stretch a holiday, to pursue educational opportunities, etc.)

Employee Signature Date

Supervisor Signature Date Recommended/Disapproved

Department Vice President Date Recommended/Disapproved

Reason if disapproved: _____

Routing: Return approved or disapproved form to Human Resources