



Best Operations, Inc.

# PTO Request Form

Your eligibility and the amount of time you can take vary based on tenure with the company. For all PTO days other than Funeral, illness under a doctor's care and Jury Duty you must have prior approval to be eligible. Once you have exhausted your annual PTO days missed days of work will become unpaid. Overall the PTO benefit is not designed to be an unplanned stay at home day. The intent is to allow you flexibility to manage your personal time off as you see fit.

Employee Name:		Supervisor	
Please Print Clearly			

### Employee Information

Average weekly hours:		Position in Company:		
Current Pay:	\$			

### Date(s) Requested:

Start Date:		End Date:		Total Days Requested:	
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€ Check if requested days exceed 31 days

(After December 1<sup>st</sup> unused PTO days will have a value of \$1 a day unless previously approved by your supervisor)

Please Indicate the reason for your request. Submit this form at least two weeks in advance. Unscheduled and emergency time off require supervisor notification and completion of this form. Submitting this form is not a guarantee that this request will be approved. Submit well in advance of the time off that you are requesting, whenever possible.

€ Vacation/ PTO	€ Bereavement Leave	
€ Jury Duty	€ Other (please specify):	

### Further Explanation:

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Employee Signature:		Date:	
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Approved: € Yes € No	
Signature of Supervisor:	Date:

Office Approval:	Date:
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