



LSU, Paul M. Hebert Law Center

REQUEST FOR LEAVE

Employee's Name: \_\_\_\_\_

I request \_\_\_\_\_ hours of leave beginning \_\_\_\_\_ thru: \_\_\_\_\_  
(day/date) (day/date)

from: o AM thru: o AM  
o PM o PM

Indicate Type of Leave:

- Annual (*Applicable to FY Employees Only*)
- Sick
- Other {specify}

Remarks:

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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