



**CHS Group Washtenaw**  
**850 S Hewitt, Suite 60**  
**Ypsilanti, MI 48197**  
**Phone: 734-480-1870 Fax: 734-480-1872**

**Time Off Request**

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date/Hours Requesting: \_\_\_\_\_

Brief Description (i.e. PTO, Weather, Low Client Count): \_\_\_\_\_

\_\_\_\_\_

Anytime you are not working during scheduled hours for any reason (as stated above) you will need to submit to the administrative assistant a Request for Time Off Sheet

Just as a heads up, CHS Washtenaw will keep track of the differences in request for time off so that we don't hold any time lost against you.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Administrator's Initials: \_\_\_\_\_

**RECEIPT: (For Office Use)**

Current PTO Balance \_\_\_\_\_

Requested hours \_\_\_\_\_

Total Balance as of: \_\_\_\_\_

Approved \_\_\_\_\_

Denied \_\_\_\_\_

Reason for Denial \_\_\_\_\_

Director of Operations Signature \_\_\_\_\_ Date \_\_\_\_\_