



Absence Request *effective February 6, 2020*

Absence Information

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

Department: \_\_\_\_\_

Manager: \_\_\_\_\_

Type of Absence Requested:

- Sick/Medical
- Maternity/Paternity
- Vacation
- Other \_\_\_\_\_
- Bereavement
- Time off Without Pay

Date of Absence: From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Absence:

You must submit requests for absences, other than sick or bereavement leave, two weeks prior to the first day you will be absent; 1 month prior for special extended requests. Failure to do so may result in delays for approval. If you submit a late request, you must wait for an approval from the HR Manager prior to making any vacation plans, booking flights etc. **A delay or lack of response does not imply approval. Flight cancellations fees are the responsibility of the employee.** As per Manitoba Employment Code, employees are eligible for vacation once they have completed one year of work and must take their vacation within 10 months of it being earned. Employees and their employers can agree on when vacation will be taken. **If an employer and employee cannot agree on when the vacation will be taken, the employer sets the vacation date.** The employer must give the employee 15 days' notice before the vacation is to be taken and cannot divide the vacation into periods shorter than one week. Employers can choose to schedule their employees' vacations as part of an annual shut down. Source [https://www.gov.mb.ca/labour/standards/doc/vacations\\_factsheet.html#q127](https://www.gov.mb.ca/labour/standards/doc/vacations_factsheet.html#q127)

I, \_\_\_\_\_, understand that time away from work is subject to management approval and company policies.

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

Human Resources/General Manager Approval

- Approved
  - Rejected
- Comments: \_\_\_\_\_

Human Resources Manager/General Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

Department Manager & Employee Agreement

I have discussed this request and its outcome with the HR Manager and the employee:

Department Manager Signature \_\_\_\_\_ Date \_\_\_\_\_