

Bourne Public Schools

36 Sandwich Road
Bourne, MA 02532
508.759.0660
508.759.1107 (fax)

Administrative Assistant Request for Vacation Time

INSTRUCTIONS: This form is to be approved by the Supervisor/Principal prior to taking vacation day(s).

Name: _____

Date(s) Requested: _____

Signature of Employee

Date

Your request to take vacation time is Approved Not Approved (see below)

Signature of Supervisor/Principal

Date

