TRIUMF

REQUEST FOR USE OF BONUS VACATION DAYS

Name: _____ Date: _____
(Please print)

Eligible Employee's ONLY: **BAE** ☐ **P&S** ☐ **TEC** ☐

FIRST WORKING DAY AWAY Year / Month / Day	**LAST WORKING DAY AWAY** Year / Month / Day	**TOTAL BONUS DAYS BEING USED**

Operational Responsibilities	**Alternate**	**Ext: Phone No**
_____	_____	_____
_____	_____	_____

Employee Signature: _____ Date:_____

Approved by: _____Date: _____
(Supervisor)

Note – The **Original** form must be Signed/Approved, and submitted to **Human Resources**;

Please ensure Copies of this form are forwarded to the following:

- Reception (Mailboxes - A) ;
- Divisional Admin Assistant

December 14, 2014