

McLaren Print System Order

Order No: 46851 Reprint Previous Order No: 8112
Order Date: 2019-07-09
User: ANNTOINETTE NICHOLS
Phone: (586) 791-5250

Ship Location: **MCLAREN MACOMB FAMILY MEDICINE**
36539 HARPER AVE
CLINTON TOWNSHIP, MI 48035

Forms

Quantity: 100
Paragon Dept No: 72050
Dept Name: MCLAREN MACOMB FAMILY MEDICINE
Company Number: 810

Order Total Price: 11.17

Item Number: MHCC-612
Item Description: Request for Scheduled Absence
Revision Date: 7/2014
Print: 1 sided black and white
Paper: 3 Part (White, Yellow, Pink)
Size: 8.5 x 11
Fold:
Finish:
Drill:
Misc Info:



McLaren Erie Region McLaren Lower Region
 McLaren Eastern Michigan McLaren Midland
 McLaren Jackson McLaren Midland & Spring
 McLaren Eastern & Central McLaren Eastern Michigan
 McLaren Health Care McLaren Port Huron
 McLaren Macomb McLaren Macomb
 McLaren Clinton Township

Request for Scheduled Absence

Today's Date: _____
To: _____
From: _____

I would like to request the following time off:
 PTO (for two and a half days, one of requests must be in volume of at least 1000 hrs)
 Other (List Day, Biweekly, etc.)
Date: _____
Employee Signature: _____
Supervisor Signature: _____

PTD Inquiry Availability
Approved: _____ Not Approved: _____
Date: _____
Date: _____

I have read this request for time off and found it correct.



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