

McLaren Print System Order

Order No: 8575
Order Date: 2015-01-28
User: Wendy Amman
Phone: 810-342-5350

Ship Location: McLaren Bristol Place / attn: Wendy
4466 W. Bristol Road
Flint, Mi 48507

Forms
Quantity: 100
Paragon Dept No: 90155
Dept Name: McLaren Therapy Services
Company Number: 60

Order Total Price: 10.87

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 Health Region
 McLaren Cancer Management
 McLaren Children
 McLaren Community Learning
 McLaren Health Care
 McLaren Intensive Care
 McLaren Primary Care
 McLaren Spine & Joint
 McLaren Stroke Management
 McLaren Trauma Management
 McLaren Women's Health
 Other _____

McLaren Cancer Institute
 McLaren Children's Hospital

Request for Scheduled Absence

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

I would like to request the following time off:
 PTO (for two week notice, one of requests must be in volume of at least 10 days)
 Other (for two week notice, etc.)

Comments: _____

PTO Request Available: _____ Not Approved
Approved: _____
I have read this request for time off and find it correct.

Date: _____ Employee Signature: _____
Date: _____ Supervisor Signature: _____

McLaren Health Region
 McLaren Cancer Management
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