

McLaren Print System Order

Order No: 8658 Reprint Previous Order No: 8112
Order Date: 2015-02-03
User: Becki Beers
Phone:

Ship Location: Becki Beers
10090 E. Lippincott Blvd.
Davison, MI 48423

Forms

Quantity: 500
Paragon Dept No: 64103
Dept Name: McLaren-Flint Davison CMC
Company Number: 810

Order Total Price: 48.88

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 Cancer Institute

McLaren Cancer Region
 McLaren Health Region
 McLaren Intensive Care
 McLaren Cancer Institute

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 increments of at least eight (8) hours)
 Other (List Day, Beginning, etc.) _____
Date: _____
Employee Signature: _____
Supervisor Signature: _____

PTO Hours Available: _____
Approved: _____ Not Approved: _____
I have read this request for time off and found it correct.
Date: _____
Employee Signature: _____
Supervisor Signature: _____

McLaren Health Region
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