



CITY OF PIKEVILLE

Time-Off Request Form

E-mail to: citymanager@pikevillecity.com

Mark one:	(X)
Personal Day	
Vacation Day	
Sick Day	

Requests made for **Personal & Vacation** time must be submitted 14 days prior to requested time off. In an emergency case the City Manager may make an exception to waive the 14 day period. **Sick Day** request may be made after the time is taken as long as employee is within policy. **Sick Day** request must be submitted to the e-mail above along with a copy to the payroll department at rhamilton@pikevillecity.com. **Sick Day** request **MUST** be submitted the day you return to work.

Today's Date:	
Employee Name:	
Position:	

Day or Days requesting off:

From:	
Thru:	
Return to work on:	

Comments

For City Manager use only:

Approved:	YES		NO
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City Manager	Date
Donovan Blackburn	

Once decision for approval employee making request will receive an e-mailed copy and a copy will be forwarded to payroll so request may be applied.