



Cook County School District 130 Vacation Day Change Request

Please complete the sections below that apply to your request and submit the form to the Superintendent or Director of Building and Grounds at least two (2) weeks in advance of your requested change.

Employee Name	Building/Department	Position	Date
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Cancel Vacation Days

Please cancel the following vacation days that were previously requested and approved. Please list each date separately below.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Add Vacation Days

Please add the following days to my approved vacation calendar. I understand that my requested days are not considered approved without the appropriate signatures.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Employee Signature

Once approved, a copy of this form will be returned to the employee and also forwarded to the Human Resources Department. After approval, the Human Resources Department will make the requested changes in the absence management system. Unless otherwise notified by the applicant, changes will be considered final and vacation time will be charged.

Approval Granted:

For Office Use Only:

Change made on calendar by:

Change made in Frontline by:

Date

Approver's Signature