

HOW TO COMPLETE THE REQUEST FOR TIME OFF/SICK PAY FORM

This form is to be completed when an employee is requesting time off or pay associated with time off.

1. Type employee name in the "Your Name:" field;
2. Select the date from "Today's Date:" drop down menu;
 - This is the date the form is completed
3. Select employee position from the drop down menu;
 - Hourly or Full Time Caregiver
4. Click on the box associated with the reason as to why the time off is needed;
 - Vacation
 - Sick
 - Leave of Absence (LOA)
 - Family Emergency
 - Religious Holiday

Your Name:	<input type="text" value="Jennifer Christiaens"/>	Today's Date:	<input type="text" value="Nov 29, 2011"/>
Your Job:	<input type="text" value="Hourly Caregiver"/>		
WHY DO YOU NEED TIME OFF?			
<input checked="" type="checkbox"/> Vacation	<input type="checkbox"/> Sick	<input type="checkbox"/> Leave of Absence (LOA)	<input type="checkbox"/> Family Emergency
			<input type="checkbox"/> Religious Holiday

5. Select the appropriate date and time for the last day of work;
6. Select the appropriate date for the last day of vacation;
 - Do not include a time.
7. Select the appropriate date and time in which you will be back at work;

What days do you want to take off?		
What will be your last day at work?	<input type="text" value="Jan 20, 2012"/>	<input type="text" value="5:00 p.m."/>
What will be your last day off?	<input type="text" value="Jan 29, 2012"/>	<input type="text" value="Time"/>
What day will you be back at work?	<input type="text" value="Jan 30, 2012"/>	<input type="text" value="7:00 a.m."/>

REQUEST FOR VACATION PAY

1. When requesting vacation pay click on YES or NO
2. Select the date requested to have payment received;
 - Pay dates are available online under Communications, November 2011
3. Enter the total amount requested to have paid.

1. Vacation Request: Do you want vacation pay?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Payday Requested:	<input type="text" value="Feb 14, 2012"/>	
Vacation Pay: Total Amount (\$)	<input type="text" value="1055.00"/>	

REQUEST FOR SICK PAY

Sick pay is accrued at a rate of seven (7) hours for every one hundred and forty (140) hours worked to a maximum of thirty-five (35) each year. Check pay stub for accrued vacation time.

1. Enter total number of hours requested to be paid;

2. Sick Pay

Sick Pay: Total Number of Hours Requested:

HOW TO SUBMIT THE FORM

This form will go directly to the leadership team for approval.

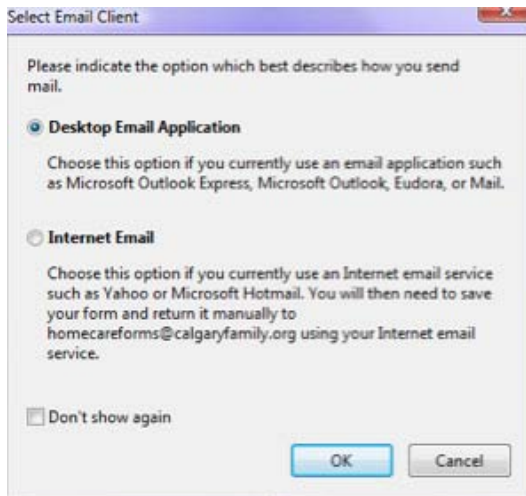
The Team Lead will contact the employee as soon as a decision has been granted.

1. Type your name in the "Employee Signature" area;
 - This will act in place of a signature
2. Select the applicable date from the drop down menu;

Date

Employee Signature

3. Click on "Send Request";
 - A pop-up screen will appear



4. Click on the applicable radio button and follow directions on the pop-up screen;
 - The document may need to be saved, attached to an email and sent to homecareforms@calgaryfamily.org
5. Change the subject line of the email to include first and last name - to alleviate confusion;
6. Add any additional comments in the body of the email;
7. Click on send.