STRATFOR

Time Off Request Form

Staff members, please complete the top section of the form and submit to your supervisor for approval. Forms should be submitted at earliest possible date.

Name: Amanda Pateman_____ **Dept**: East Asia__(monitor)____

	REASON	DATE(S)	# OF DAYS	# OF HOURS
☐	Vacation	Aug 21- Sept 3 (inclusive)__	_10_____	_____
☐	Sick Leave*	_____	_____	_____
☐	Jury Duty	_____	_____	_____
☐	Bereavement Leave	_____	_____	_____
☐	Other** *(explain below)*	_____	_____	_____

Comments/Further Explanation *(when required):*

As dictated by my Chinese visa, I must leave China prior to August 22. A 2 week vacation period was negotiated with Jen, by which time my visa situation will be clear.

* *It is recognized that sickness is not planned and sick leave cannot be requested in advance. When unable to work due to illness, please notify your supervisor and submit the request form as soon as you return to work.*

*** Other paid leave requires Sr. Mgmt approval.*

Employee Signature: _____Amanda BJ Pateman_____ **Date**: 1 Aug 2008_____

Supervisors, please verify that the staff member is eligible for paid time off and submit the approved/denied form to HR. Please notify HR in case of an employee's extended leave (more than 5 days) due to personal or family illness.

SUPERVISOR'S RECOMMENDATION	COMMENTS:
☐ Approved	_____
☐ Approved with following modification	_____
☐ Denied for following reason	_____

Supervisor Signature: _____ **Date**: _____

All paid time off should comply with Strategic Forecasting, Inc. policy. For policy questions and additional information, please contact Leticia Gonzalez at 512.744.4300 or leticia.gonzalez@stratfor.com.

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