



P.O. Box 519  
Crested Butte, CO 81224  
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## RMBL Leave Request

Date: \_\_\_\_\_

Employee's Name: (please print): \_\_\_\_\_

Supervisor's Name: (please print): \_\_\_\_\_

I request leave from RMBL employment on the following date(s):

\_\_\_\_\_

Days of leave taken (to date) during current calendar year, **prior to** above requested dates:

\_\_\_\_\_

\_\_\_\_\_ This leave request is paid, as per employee's contract, and does not exceed allowed leave. Salary is not reduced.

\_\_\_\_\_ This leave request is NOT paid, as per employee's contract, and exceeds allowed leave. Salary is reduced by the following dollar amount or number of days: (please explain):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date