



Columbia Fire & Rescue

Request for Leave

(For use by 40-hour staff only.)

Name: _____ Date: _____

Dates Requested:

From: _____ Until: _____

Reason:

Annual Leave: _____ Conference: _____ Other: _____

Explanation: _____

Contact Phone Number during Absence: _____

Employee Covering During Absence: _____

Home: _____

Beeper: _____

Mobile: _____

Approval: _____ Date: _____