

Creative Potential, LLC 1031 Norwich New London Tpk. Unit 10 Uncasville, CT. 06382 p-(860)848-0514, f-(860)-848-0523 www.Creativepotentiallic.com

Absence Request

	Abse	nce Information	
Name:			
Client Case Load:			
Supervisor:			
Type of Absence Reque			
Sick/ Medical	☐ Vacation	☐ Bereavement ☐ Time Off Without Pay	
☐ Military	☐ Jury Duty	☐ Maternity/Paternity ☐ Other	
Dates of Absence: From		To:	
	Sick timehours	PTO Timehours	
Reason for Absence:			
You must submit reques will be absent.	sts for absences, other than	n sick leave/ Bereavement, two weeks prior to the first day y	ou
Employee Signature		Date	
		Approval	
□ Approved		Approvai	
Approved			
Rejected			
Comments:			
Manager Signature		Date	



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