TownSteel
PERFECTION IN PROTECTION

ABSENCE FORM

Date:_____

Manager:_____

Name:_____

I shall be absent / was absent on the following date:

Date:_____   Time Start: _____

                                        Time End: _____

Reason:_____

Signature:_____

****

Date:_____

Approved:_____

Not Approved:_____

                              Vacation Pay
                              Personal Pay
                              No Pay

Manager's Signature:_____

Ownership Signature:_____