

WALLINGFORD  SWARTHMORE  
SCHOOL DISTRICT

**Vacation Form**

**Employees should submit vacation requests to their supervisor prior to the requested date.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Building / Department

I request the following day(s) for vacation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Approved:

\_\_\_\_\_  
Supervisor/Principal

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Human Resources

\_\_\_\_\_  
Date