	Request f	or Makeup Tim	e		_
Employee Name:					
Worksite Company:					
am requesting time off	20.2		21		
am requesting time off	as a result of a per	rsonal obligation	on:		
furing the house of	(specify d	ate)			
furing the hours of	Lam pm to	🔲 am 🔲 p	m.		
ours your plan to want	st time within the	ame workweek	ac follows. /m:	lin the de	
hours your plan to work to han 11 hours in a day hat was or will be lost	or 40 hours in a due to a persona	sed times). Emp workweek as a if obligation.	oloyees may no result of ma	iot work mo king up time	re
				_	
understand that:					
Any makeup time I A separate written i	work will not be no	aid at an out			
A separate written i My makeup time re-	equest is required	for each occasion	ne rate;		
time off work	equest is required quest must be app rk makeup time, w	roved in writing	before I take t	st makeup tin	ne;
THE OIL MOLK OF MO				we reducated	
4. If I take makeup tin					
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