



# DUBLIN UNIFIED SCHOOL DISTRICT VACATION SCHEDULING REQUEST (For 12 Month Employee Only)

Name: \_\_\_\_\_

Site: \_\_\_\_\_

Position: \_\_\_\_\_

**Check one:**

\_\_\_\_\_ Scheduling Window # 1- (Submit By April 15th)

Date Received by Supervisor \_\_\_\_\_ Initial \_\_\_\_\_

\_\_\_\_\_ Scheduling Window # 2- (Submit By August 1st)

Date Received by Supervisor \_\_\_\_\_ Initial \_\_\_\_\_

Vacation Date Choices	From Date	To Date	Total No. Work Days	Approved Supervisor Initial	Not Approved Supervisor Initial
First Choice:					
Second Choice:					
Third Choice:					

*Notification of approval or denial for April 15<sup>th</sup> requests will be received by April 25<sup>th</sup>.  
Notification of approval or denial for August 1<sup>st</sup> requests will be received by August 15<sup>th</sup>.*

**\*Note:**

- **No more than ten (10) days during student attendance days may be requested.**
- **Week prior to the first day of school is a “Black Out” week, no vacations will be approved.**
- **Formal written requests to schedule vacation shall be submitted to supervisor so that on June 30, unit member will have no more hours/days of vacation on the books than were earned in the fiscal year ending on that June 30.**
- **Vacation requests for up to a maximum of 5 reserve days not included in the scheduling requests must be submitted on the Time Off Request form not less than ten (10) days prior to the first day of the proposed vacation.**

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

Comments: