



**Greater Opportunities of The Permian Basin Inc.**  
*Head Start School Readiness Academy*

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GREATER OPPORTUNITIES OF THE PERMIAN BASIN – HEAD START  
 LEAVE REQUEST

(FORM TO BE USED TO PROVIDE SUPERVISOR WITH ADVANCED WRITTEN NOTICE OF  
 EMPLOYEE'S INTENT TO REQUEST LEAVE)

"Leave pertains to extended periods of absences" (i.e. a week or more)

NAME: \_\_\_\_\_

COST CTR: \_\_\_\_\_ STAFF ID #: \_\_\_\_\_ JOB #: \_\_\_\_\_

Leave Time Starts: \_\_\_\_\_ AM-PM Date: \_\_\_\_\_

Leave Time Ends: \_\_\_\_\_ AM-PM Date: \_\_\_\_\_

TOTAL WORKING HOURS EMPLOYEE IS TO BE ON LEAVE: \_\_\_\_\_ Hrs.

- |                                   |                                    |
|-----------------------------------|------------------------------------|
| _____ 1. Family & Medical (FMLA)  | _____ 6. Paid Time Off (PTO)       |
| _____ 2. Holiday (HOL)            | _____ 7. Sickness – Personal (SIC) |
| _____ 3. Jury/Civic Duty (JD/CD)  | _____ 8. Sickness – Family (SIC)   |
| _____ 4. Leave without Pay (LWOP) | _____ 9. Worker's Comp Injury (WC) |
| _____ 5. Military (MIL)           | _____ 10. *Other – Explain Below   |

\*EXPLANATION OF ABOVE, IF NECESSARY: \_\_\_\_\_

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

Employee: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Executive Director: \_\_\_\_\_ Date: \_\_\_\_\_

WHEN POSSIBLE, LEAVE MUST BE APPROVED IN ADVANCE. ALL LEAVES MUST BE ACCURATELY NOTED ON TIMESHEET. THIS FORM IS NOT A REPLACEMENT FOR TIMESHEETS. IT IS INTENDED PRIMARILY TO BE USED TO COMMUNICATE WITH THE SUPERVISOR, NOT THE PAYROLL DEPARTMENT.