

BOARD OF REGENTS FOR HIGHER EDUCATION
SYSTEM OFFICE

Authorization to Carry Over Vacation Leave

Due to extraordinary circumstances, I request to carry forward the vacation days in excess of the policy or contract standard into the next calendar year.

Name of employee: _____ **Date:** _____

Number of days to be carried over: _____

Briefly described below are the circumstances which prevented me from using the required number of vacation days:

SIGN AND RETURN FORM TO HUMAN RESOURCES BY DECEMBER 1ST FOR CONSIDERATION.

SIGNATURES:

Employee Signature

Date

Approved, VP for Human Resources

Date