

HUMAN RESOURCES/CIVIL SERVICE SAFETY RISK DEPARTMENT

COUNTY COURTHOUSE

FAX:

PHONE: (956) 544-0827

(956) 550-1373

1100 E. MONROE ST. SUITE 118 **BROWNSVILLE, TEXAS** 7852

REQUEST FOR LEAVE OF ABSENCE

I Would like to request leave on			
And return to work on		_ for the following reason (s)	
It is my understanding that	failure to return on the above o	date or failure to notify the	
county that I with an extens	ion can result in my separation	from the county.	
Charged to:	Days/Hrs	Signature of Employee	
Vacation			
Sick Leave		Date	
Comptime		Supervisors Signature	
Employees Name:	Soc	Social Security	