

# **REQUEST FOR MILITARY LEAVE OF ABSENCE**

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

Requested Dates: From: \_\_\_\_\_ (1<sup>st</sup> day of leave)  
To : \_\_\_\_\_

Type of Leave Requested: \_\_\_\_\_ Annual Training  
\_\_\_\_\_ Active Duty

Date to report for duty \_\_\_\_\_

Anticipated length of duty \_\_\_\_\_

**I request to use accrued hours while I'm on leave using:**

\_\_\_\_\_ PTO \_\_\_\_\_ Holiday

**Or**

\_\_\_\_\_ I do not want to use any accrued hours, and understand that I will have to pay my portion of any employee benefits premiums to the City.

Authorized Contact person while you are on Military Leave:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship \_\_\_\_\_

I understand that if I do not return from my leave of absence at the expiration of this leave, abiding by USERRA rules, my employment may be terminated.

\_\_\_\_\_  
Employee Name

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**PLEASE ATTACH A COPY OF YOUR MILITARY ORDERS**

