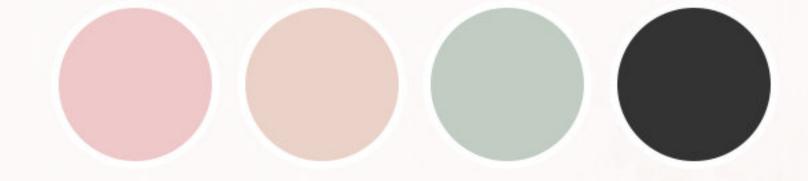
#### FILE FORMATE

Editable File PDF

## Canva

### US LETTER SIZE

#### COLOR THEMES



#### SPECIFICATIONS

- > Change Any Font
- > Change Any Color
- > Change Size (PRO)
- > Fully Customizable
- > Add Any Object
- > Easy To Print

(Print at Home Easily)

# Employee Firme-off Regnest

Employee Name :	
Department :	
TIME REQUESTING OFF	
Starting On :	Ending On :
Total Days :	Total Hours :
Return To Work :	
REASON FOR REQUEST	
EMPLOYEE CERTIFICATION	
New York Control of the Control of t	ion is accurate, and I understand that this request is ment approval and company policies.
Employee Signature :	Date:
NOTES	
EMPLOYER'S DECISION	
Approved	Rejected
Employer Signature :	Date :