

Flex-Time Pre-Arranged Permission Form

I _____ am requesting Flex-Time _____
Employee Name Date/Time Leaving

Date/Time Arriving

My Reason For This Request

I will make up my Flex-Time on _____
Date(s) Actual Hour (Example (3:45pm))

I understand that this leave must be pre-approved or I will be using another form of leave.

Employee's Signature

Administrator's Signature

Date Submitted (Employee)

- Support Employee MUST flex their time in the same work week.
- Instructional Personnel MUST flex their time in the same pay period.