



**BEREAN BAPTIST CHURCH**  
FAYETTEVILLE, NC 28314

**Time Off Request Form**

**NAME** \_\_\_\_\_

**DATE (s) Requested** \_\_\_\_\_

\_\_\_\_\_

**Charge To**

**No. of Days**

**Vacation**

\_\_\_\_\_

**Personal Day**

\_\_\_\_\_

**Without Pay**

\_\_\_\_\_

**Sick**

\_\_\_\_\_

**Compensation Time**

\_\_\_\_\_

**BBA - Times of Responsibility** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Comments** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Approved** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

**Approval Authority** \_\_\_\_\_

**Date Approved** \_\_\_\_\_