Unpaid Vacation Time Request

Calvin employees have the opportunity, with supervisor approval, to take an extra week or two of unpaid time off each year. The cost of this would be approximately two percent of one's salary per additional week of unpaid time off. In addition, benefits based on annual salary (pension contributions, life insurance, and long term disability) will also be adjusted. This adjustment can be a permanent feature of employment or renewed on an annual basis. Forms should be completed and returned to Human Resources.

For salaried (exempt) employees:
With supervisor approval the unpaid time may be taken at any time during the academic year (September through August). If the request form is returned to Human Resources by August 15, the salary reduction will be spread over the academic year with a portion of the money deducted from each pay period. Salary reductions for requests made later than August 15 will be spread over the remaining paychecks for that academic year.

For hourly (non-exempt) employees:
With supervisor approval the unpaid time may be taken at any time during the academic year (September through August). Hourly employees are paid for hours worked so any unpaid time would be reflected during the pay period in which the unpaid time is taken. Completion of this form is still mandatory.

Once processed, you will receive a copy of this form for your records.

Name ______________________________ ID # ______________________

Amount of unpaid time requested for the ______-______ academic year:

Salaried _______ 1 week _______ 2 weeks
Hourly Number of days _______ (up to 10)

Is this a permanent change? Yes / No

Employee Signature_________________________ Date_________

Supervisor Signature_________________________ Date_________

Vice President Signature_______________________ Date_________

For HR Office Use:

Date form received: _______________________

Current Salary: ______________ New Salary: ______________

HR Signature _____________________________ Date ___________

____ WAGS ______ PPOS ______ ESHN ______ DISC ______ GLIF ______ Copy to payroll ______ Copy to Employee