



Department of Human Resources
 South Hall, Room 106
 P: 718.289.5119
 F: 718.289.6000

Bronx Community College
 of The City University of New York
 2155 University Avenue
 Bronx, New York 10453

Application for Annual Leave/Unscheduled Holidays

This application must be submitted and approved when requesting four (4) or more days of Annual Leave. The application must be submitted to the Department of Human Resources, prior to the beginning of leave date(s).

Date: _____

Name: _____ Department: _____

Title: _____ Extension: _____

Type of Leave Requested	Dates Being Requested	Number of Days
Annual		
Unscheduled Holidays		
Total		

Employee Signature: _____ Date: _____

Supervisor Approval

Name: _____ Title: _____

Signature: _____ Date: _____

Human Resources Approval

Name: _____ Date: _____

For Department of Human Resources Use Only

Leave Record	Days Remaining	Hours Remaining	Minutes Remaining
Annual			
Unscheduled Holidays			