

**CITY OF YREKA**  
**LEAVE REQUEST/PAYROLL EXCEPTION FORM**

Employee Name: \_\_\_\_\_

\_\_\_\_\_ No Exceptions Claimed for Pay Period ended \_\_\_\_\_ - **Management Only**  
(Supervisor Signature not required) If exceptions apply, please indicate below.

It is requested that I be granted: \_\_\_\_\_ Hours of **Comp Leave**

\_\_\_\_\_ Hours of **Sick Leave\*\*** \_\_\_\_\_ Hours of **Admin Leave**

\_\_\_\_\_ Hours of **Sick Leave Family\*\*** \_\_\_\_\_ Hours of **Bereavement Leave**  
(Maximum 10 days per calendar year)

\_\_\_\_\_ Hours of **Vacation** \_\_\_\_\_ Hours of **Comp Time Accrual**

\_\_\_\_\_ Hours of **Floating Holiday** \_\_\_\_\_ Hours of **Overtime Payment**

For the Date and Time Listed Below:

From Date: \_\_\_\_\_ To Date: \_\_\_\_\_

From Time: \_\_\_\_\_ am / pm To Time: \_\_\_\_\_ am / pm

Reason: \_\_\_\_\_

\_\_\_\_\_  
\*\*If leave is pursuant to the Family and Medical Leave Act (FMLA) and California Family Rights (CFRA), under City of Yreka Resolution 2371 such leave is counted against your annual FMLA leave entitlement (up to 12 weeks). During this leave, City Policy requires you to use accrued vacation or sick leave (10 days per calendar year) or other leave (comp time). If this leave is pursuant to FMLA, please notify your supervisor immediately and provide your supervisor with your scheduled absences so that the leaves can be appropriately credited on your paycheck.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

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**Supervisor Action:** \_\_\_\_\_ Approved \_\_\_\_\_ Disapproved for the following reason:

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\*Please see the back of this form for instructions.

## INSTRUCTIONS FOR LEAVE REQUEST/PAYROLL EXCEPTION FORM

Previous Leave Request Forms are now obsolete. Please discard any forms you may have.

The new form for requesting leave is titled “Leave Request/Payroll Exception Form.”

This Leave Request/Payroll Exception Form is to be used by **ALL** employees.

Any request for time off is to be completed in the normal manner as on the previous form by all employees.

The newly added portion of the form entitled No Exceptions Claimed is for management employees who are reporting no time off for the pay period indicated and must be submitted each pay period.