



Time Off Request Form

Today's Date: _____

Employee Name: _____ Shop Location: _____

30-Days or Greater Advanced Notice

Per Global Bikes policy, time off requests must be submitted in writing to your manager for approval. If you submit a request with 30-days or greater advanced notice, your manager will work to find coverage on your behalf. It is our goal to honor as many requests as possible, however at times it is not always possible. Additionally, PTO requests are made priority, given that there are not already overlapping prior requests.

Date of day(s) off requested: _____

Is this a PTO request? Yes No

Within 30-Days

If the request for time off is submitted within 30-days, it is up to the employee to find coverage. If this is the case, please submit this form with the signature of the employee that has agreed to cover your shift(s). Please note that coverage needs to be provided by an employee of similar ability.

Date(s): _____ Printed name of employee to Cover: _____

Signature of the employee providing coverage: _____

Date(s): _____ Printed name of employee to Cover: _____

Signature of the employee providing coverage: _____

Date(s): _____ Printed name of employee to Cover: _____

Signature of the employee providing coverage: _____

*Submittal is not a guarantee of approved coverage. Please reference your locations online calendar to verify that your time off request has been facilitated. Your manager will notify you if your request has been denied.

*Please note that while we try to provide consistent schedules for all employees at times, you may be required to work additional days and/ or outside of any "set schedule". With that said, we will do our best to provide 21 days notice of schedule deviation.

Approved: _____ Denied: _____ Edits Made to Online Calendar: Yes No

Approved/Denied By: _____ Date: _____

