

**Graduate Employee Organization  
Vacation Payout Request Form**

**To be completed by GEO Member:**

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

Title: \_\_\_\_\_

HR Employee ID: \_\_\_\_\_

Student ID (Spire #): \_\_\_\_\_

Department: \_\_\_\_\_

Contract Period for Which Vacation Payout is Requested: \_\_\_\_\_

Number of Vacation Hours Requested for Payout: \_\_\_\_\_

Documentation must be attached showing that you attempted to utilize your vacation time, but were denied.

GEO member signature: \_\_\_\_\_

Date: \_\_\_\_\_

**To be completed by the Department:**

I certify that the attached documentation demonstrates that (a) the above-named employee had earned \_\_\_ hours of vacation for the contract period \_\_\_\_\_; (b) filed a request for taking vacation which was denied in whole or in part; and (c) and thereafter received prior written supervisor approval to forgo the number of vacation hours listed above.

Supervisor signature: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

Date: \_\_\_\_\_

GFAF #: \_\_\_\_\_

Speed Type: \_\_\_\_\_