

# Ardelle Associates

## Leave Request Form

Please use this form when using accrued Paid Time Off (PTO) or accrued Sick Leave. PTO and/or Sick Leave must be taken in at least 1(one) hour increments. In order to be paid for your PTO, you must submit your request form to the Stephanie Williams at least 1 week prior to the dates that you are requesting for PTO. Sick Leave requests cannot be submitted prior to use of sick leave. Failure to submit your PTO and/or Sick Leave Request in a timely manner will delay payment of your PTO and/or Sick Leave. If you are using both Sick and PTO Leave, you must submit 2 forms, one for each leave request. All leave requests must be signed by your supervisor before submitting as acknowledgement of you be on leave.

Submit this form by email to [swilliams@ardelle.com](mailto:swilliams@ardelle.com).

Please mark which type of leave you will be using.

SICK Leave

PTO Leave

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

Today's Date: \_\_\_\_\_

Dates Requested off: \_\_\_\_\_

Number of Hours per day: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Site Supervisor Approval: \_\_\_\_\_

PLEASE SUBMIT THIS FORM TO:

[swilliams@ardelle.com](mailto:swilliams@ardelle.com)



**Ardelle Associates, Inc**

344 Commerce Street  
Alexandria, VA 22314  
Phone 703-642-9050