



---

|  |                              |
|--|------------------------------|
| <b>Policy Number</b><br>HR_07-15             | <i>Vacation Requests</i>     |
| <b>Date</b>                                  | <b>Resolution Number</b>     |
| <b>References</b><br>Council, CAO, Employees | Mayor _____<br><br>CAO _____ |

Being a policy to provide a guide for employee vacation requests.

**POLICY STATEMENT**

Whenever possible, requests for vacation will be granted as requested by staff members. However, staff members must bear in mind that operating the municipality requires an adequate number of trained staff in the different departments of the municipality, and a request for vacation may be denied if it will cause an inadequate level of service to the municipality.

1. All vacation requests must be submitted to the CAO for approval.
2. Employees are required to submit a vacation schedule any time prior to March 31<sup>st</sup> of each year.
3. Vacation requests will be considered and approved at any time up to April 30<sup>th</sup> and



*Riverdale Municipality*

will take into consideration availability, need, and seniority.

- 4. Prime vacation dates will be allotted on a rotational basis when numerous requests for the same dates are received.
- 5. A request to reschedule vacation days must be made to the CAO for approval.

Vacation time is important and staff certainly earn and deserve the vacation time coming to them. Requests for vacation time will be honored but must be balanced against adequately staffing the municipality in order to best serve the public.

**Vacation Request Form**

|                     |       |
|---------------------|-------|
| Employee            | Name: |
| Employee Job Title: |       |
| Supervisor          | Name: |
| Today's Date:       |       |

**Dates requested**  
**Total Days**



*Riverdale Municipality*

---

|                                |  |
|--------------------------------|--|
|                                |  |
| Days Remaining/Carried Forward |  |

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_ Reason if Denied

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Chief Administrative Officer

Date

Riverdale Municipality