



College of the Atlantic  
Salaried Employee Vacation Time Sheet

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

**Instructions:**

Please indicate your days off by writing one of the following letters in the corresponding date boxes on the calendars:

V (vacation)

A (accumulated)

P (personal)

O (other)

**Total Days This Quarter:**

Please add up all days and write the totals below.

\_\_\_\_\_ Vacation

\_\_\_\_\_ Personal

\_\_\_\_\_ Accumulated (needs approval)

\_\_\_\_\_ Other \_\_\_\_\_  
*(Please explain — bereavement, jury duty, etc.)*

\_\_\_\_\_  
Employee Signature Date

\_\_\_\_\_  
Manager Signature Date

*This time sheet needs to be submitted to Missy Cook by October 15, 2019.*

July 2019

Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4 INDEPENDENCE DAY	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

August 2019

Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

September 2019

Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9 LABOR DAY	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					