



Department of Human Resources

10900 Euclid Avenue
Cleveland, Ohio 44106-7047

phone 216.368.6964
fax 216.368.4678

VACATION BUY

www.case.edu/finadmin/humres/

Personal Information

Full Name: _____
Last *First* *M.I.*

E-mail Address: _____

Job Information

Title: _____ Employee ID: _____

Supervisor: _____ Department: _____

Work Location: _____ Fax Number: _____

Work Phone: () _____

Hire Date: _____ Salary: \$ _____

Option Information

VACATION BUY-

How many days & hours: _____ **Days** **Hours**

Print Name **Sign Name** **Date**

Supervisor's Name **Supervisor's signature** **Date**