

LONG BEACH PUBLIC SCHOOLS

**EMPLOYEES WITH INDIVIDUAL CONTRACTS**

REQUEST FOR PAYMENT IN EXCHANGE FOR VACATION DAYS

I \_\_\_\_\_ request to be paid out for  
\_\_\_\_\_ vacation days for the \_\_\_\_\_ school year.

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

**Attendance:**

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# of days verified & deducted \_\_\_\_\_

\_\_\_\_\_  
Confidential Keyboard Specialist Date

Verify FM changes

\_\_\_\_\_  
Senior Personnel Clerk Date

**Payment:**

# of days \_\_\_\_\_ X rate in individual contract \_\_\_\_\_ = \$ \_\_\_\_\_

\_\_\_\_\_  
Administrative Assistant Date

\_\_\_\_\_  
Executive Director, Human Resources Date

\_\_\_\_\_  
Business Office Payroll Clerk Date