



**NISHNAWBE-ASKI LEGAL SERVICES CORPORATION
VACATION CARRY-OVER REQUEST**

Date:	March 12, 2024
Name of Employee:	Tracey Coultis
Position:	Payroll Officer
Supervisor:	Josh Swearingen
Program:	Finance

VACATION CREDITS

Carry-over balance: 535
 No. of days requested: 5

REASON FOR CARRY-OVER AND DATE TO BE TAKEN

Started in September and no time to take 5 vacation days before the end of March 2024.

I will use these days in addition to my regular vacation days throughout the year and before March 31, 2025 as required.

Employee's Signature *Tracey Coultis* Date: March 12, 2024

Supervisor's Signature *Josh Swearingen* Date: _____

Executive Director Signature _____ Date: _____

- 12) Carrying Over Vacation Leave
- The carry over request form must be filled out and signed by a manager and the Executive Director for an **excess** of a 5 day carry over.
 - Carry over requests must be made on or before March 15 of the fiscal year and be accompanied with an explanation for how and when the employee plans to use the carry over days in the next fiscal year.
 - All approved carry over must be used by March 31. Failure to use the carry over by March 31 of the following fiscal year will result in forfeiture of the carry over.