

# REQUEST FOR APPROVAL OF LEAVE FORFEITURE

*For use by Office of Science Site Offices*

Employee Affected: \_\_\_\_\_ Organizational Unit: \_\_\_\_\_

Beginning and Ending Dates of Occurrence: \_\_\_\_\_ Number of Hours Requested: \_\_\_\_\_

## PART I. FORFEITURE DUE TO EXIGENCY OF THE PUBLIC BUSINESS

Copies of approved leave requests, e.g., OPM-71, Request for Leave or Approved Absence, or electronic ATAAPS verification, are attached to document that leave was scheduled before the beginning of the third pay period prior to the end of the leave year.

**A. What work prevented the employee from using previously approved leave?** *(Discussion must include specific work assignments and related dates and must specifically state why the work could not have been delayed.)*

**B. Reason previously approved leave could not have been rescheduled:** *(Discussion must cover the entire period between the time of the exigency and the end of the leave year. Reasons based on use of previously restored leave are insufficient.)*

## PART II. FORFEITURE DUE TO ILLNESS

Copies of approved leave requests, e.g., OPM-71, Request for Leave or Approved Absence, or electronic ATAAPS verification, are attached to document that leave was scheduled before the beginning of the third pay period prior to the end of the leave year.

**Document circumstances below describing that illness occurred so late in the leave year or was of such duration that leave could not be rescheduled during the leave year:**

## PART III. FORFEITURE DUE TO ADMINISTRATIVE ERROR

**Describe administrative error that caused loss of annual leave:**

## PART IV. APPROVAL

Recommended by: \_\_\_\_\_ Date: \_\_\_\_\_  
Supervisor

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Site Office Manager

### **Forward approved forms to your Servicing Human Resources Office**

*Leave lost as a result of approved forfeitures cannot be restored prior to the beginning of the next leave year. A Request for Restoration of Leave must be submitted by the requesting office in order to initiate the restoration process. Forms are available at <http://www.oro.doe.gov/pmab/Forms/Forms.htm> pending publication in SCMS.*

## PART V. FOR HUMAN RESOURCES USE ONLY

**This request for approval of leave forfeiture complies with applicable regulatory provisions.**

HRS: \_\_\_\_\_ Date: \_\_\_\_\_