

**Section 1** (To be filled out by the Employee and sent to their District or Department Manager and [lbedpool@gmail.com](mailto:lbedpool@gmail.com))

Employee Contact Information			
Name of employee:		Local #:	Employee ID #:
Store/Dept #:	Phone #:	E-mail:	
Time Off Dates and Activity Type			
Date(s)	# of Hours *	Reason for Leave	
		<input type="checkbox"/> Provincial Labour Management Committee <input type="checkbox"/> Benefits and Pension Committee <input type="checkbox"/> Education and Communications Committee <input type="checkbox"/> Grievance Committee <input type="checkbox"/> Provincial Health and Safety Caucus <input type="checkbox"/> Divisional Officer Duties <input type="checkbox"/> Regional Labour Management Committee <input type="checkbox"/> Chair <input type="checkbox"/> Regional Attendee <input type="checkbox"/> Other:	<input type="checkbox"/> Divisional Bylaw Review Committee <input type="checkbox"/> Divisional Trustee Audit Committee <input type="checkbox"/> Employment Equity Committee <input type="checkbox"/> Local Tour ( <i>max 40 hours per year</i> ) <i>Hours to be used</i> _____ <i>Yearly Hours Remaining</i> _____ <input type="checkbox"/> Member Representation ( <i>stewards</i> ) <i>List the store or department you are representing:</i>
OPSEU Staff Contact Information			
Name:		E-mail:	

*Note: Time off shall be reimbursable only for hours scheduled*

**Section 2** (To be filled out by the Divisional Chair or Secretary and sent to the LCBO District or Department Manager)

LBED Divisional Officer Approval		
Name:	Position:	Date:
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved - Reason:		

**Section 3** (Approval by LCBO Manager to be sent to the Employee, OPSEU Staff identified in section 1 and the emails below)

LCBO Contact Approval (District or Department Manager)		
Name:	Department:	E-mail:
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved - Reason		Date:

**If submitting the form with less than 7 days' notice to the LCBO, please provide the reason(s) at the time of submitting.  
Please note that for a requested leave to be fully approved, all sections must be filled out.  
Failure to fully complete the form may result in wages not being paid.**