REQUEST FOR USE OF  
BLOOD DONATION LEAVE  
(Off Premises)

Eligible employees may use a single **THREE HOUR** period of **UNPAID LEAVE** per calendar year within which to donate blood “Off-Premises”. Application for the use of such leave shall be made not less than three working days in advance of the anticipated date on which the leave is to be used.

1. Name of employee:_______________________________________________________
2. Date of Leave Request:____________________________________________________
3. Time Period of Leave Request:______________________________________________
4. Location of Blood Donation Site: ____________________________________________
5. Comments: __________________________________________________________________

Signature of employee: __________________________________________________________________

Date request received:___________________________________________________________

Signature of supervisor: __________________________________________________________________

**** Please provide appropriate documentation of the blood donation upon return to work****

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