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| **1. DATOS GENERALES** |

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| **FECHA DE SOLICITUD** | | | **NOMBRES Y APELLIDOS DEL EMPLEADO** | | | **DOC. DE IDENTIFICACIÓN** |
| **DD** | **MM** | **AAAA** |  | | |  |
|  |  |  |
| **CARGO** | | | | **ÁREA / CLIENTE EN MISIÓN** | **DESEA SU PAGO DE VACACIONES** **ANTICIPADO** | |
|  | | | |  | SI\_\_\_: NO\_\_\_\_\_ N/A\_\_\_\_\_ | |

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| **2. TIPO DE SOLICITUD (Marque con una X)** |

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| El empleado solicita Vacaciones |  | **Observación:** |  |  | | |
| x |  |  |  |
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|  |  |  |
| El empleado solicita Licencia o Permiso NO remunerada |  |  |  |  | | |

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| **3. CAUSACIÓN DE VACACIONES (diligenciado por bienestar)** |

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|  | **PERIODO DE CAUSACION** | | | | | | |
|  | **PERIODO** | | | **Días Hábiles** | **Días Calendario** | **Días Asignados Hábiles** | **Días que acumula** |
| **1** |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |
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| ***Disfrutará sus vacaciones***  ***desde el día*** | | |  | ***Hasta el día*** | | |  | ***Debe reintegrarse a sus***  ***labores el día*** | | |
| **DD** | **MM** | **AAAA** |  | **DD** | **MM** | **AAAA** |  | **DD** | **MM** | **AAAA** |
|  |  |  |  |  |  |  |  |  |  |  |

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| **4. APROBACIÓN DEL JEFE INMEDIATO (Diligenciado por el Jefe Inmediato)** |

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|  |  |  | **APROBADA** | **x** |  | **A PARTIR DEL** | | |  |
| **RECHAZADA** |  |  | **DD** | **MM** | **AAAA** |
| **MODIFICAR A:** |  |  |  |  |  |

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| **OBSERVACIONES** |

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| ¿Se designa a otro empleado como encargado del puesto durante las vacaciones? | Sí |  | No |  |

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| **NOMBRES Y APELLIDOS DEL EMPLEADO** | **CARGO** | **FIRMA ENCARGADO** |
|  |  |  |

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| --- | --- | --- | --- | --- |
| **JEFE INMEDIATO** |  | **EMPLEADO** |  | **BIENESTAR** |
| **Nombre** |  | **Nombre** |  | **Nombre** |
|  |  | **Firma** |  |  |
| **Firma** |  | **C.C** |  | **Firma** |