

Mennonite Village
Emergency EL Cash Out Form

*Approval from the Employee Assistance Committee has been granted,
allowing employee to use their current Earned Leave benefit for an
emergency situation.*

Name: _____

Number of EL Hours you want to use: _____

Number of EL Hours approved by committee: _____

Number of Hours Remaining: _____

Requested by: _____ Date: _____

Record of Cash outs in the Last 12 Months:

0-4 mos _____ Amount _____

5-8 mos _____ Amount _____

9-12 mos _____ Amount _____

Approved by: _____ Date: _____
Human Resources