

This material is part of a collection that documents the harassment, discrimination, and retaliation perpetrated against Alaska's women research scientists by their supervisor, with full knowledge (and arguably, "tacit approval") of their federal employer, the USDA Agricultural Research Service (ARS)

PRODUCTION

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Edit/View Leave Request

Request by: CYNTHIA K. BOWER (BOWERC**)**

Request Information

Leave Type Annual Leave
Transaction Type 61 - Annual Leave
Submitted Date Jun 09 2010 5:27 PM
Modified Date Jun 18 2010 6:18 PM
Hours Requested 4:00 hours

Previous Month		June 2010					Next Month
Sun	Mon	Tue	Wed	Thu	Fri	Sat	
		1 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	2 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	3 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	4 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	5 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	
6 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	7 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	8 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	9 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	10 Hour: 4:00 From: 8:00am To: 12:00am	11 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	12 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	
13 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	14 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	15 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	16 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	17 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	18 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	19 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	
20 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	21 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	22 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	23 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	24 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	25 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	26 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	
27 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	28 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	29 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>	30 Hour: <input type="text"/> From: <input type="text"/> To: <input type="text"/>				

Sick Leave

If you are requesting **sick leave**, you must indicate the reason.

Please specify:

- Illness/injury/incapacitation of requesting employee
- Medical/dental/optical examination of requesting employee
- Care of family member, including medical/dental/optical examination of family member, or bereavement
- Care of family member with a serious health condition
- Other (Provide the reason in Remarks)
- None

Family and Medical Leave Act

If **annual, sick, or leave without pay** will be used under the **Family and Medical Leave Act of 1993 (FMLA)**, indicate what it will be used for.

Please specify:

- Birth/Adoption/Foster Care
- Serious Health Condition of Spouse, Child, or Parent
- Serious Health Condition of Self
- None

Contact your supervisor and/or your personnel office to obtain additional information about your entitlements and responsibilities under the FMLA. Medical certification of a serious health condition may be required by your agency.

Remarks

(200 chars max)

I am changing this Admin leave to annual leave. I fully recognize that I am being bullied through the willful misinterpretation of PP 402.4

