

(Sample Rescission of Vacation and Comp Time Off)
CITY OF _____

Interoffice Memorandum
Date

TO: [employee's name]
FROM: Supervisor
RE: Rescission of Previously Approved (*Vacation/Compensatory Time Off*)
DATE:

Please be advised that, the Local State of Emergency for Pandemic Influenza has caused staffing shortages City wide. Unfortunately, this means that I must rescind my prior approval of your (*date of vacation leave and compensatory time off*) in order to provide staffing coverage for (*name of work unit*).

However, please note that:

[*The following is only for employees whose approved vacation is being rescinded:*]

- Employees eligible for vacation leave may accrue up to 240 hours vacation leave. However, should rescission of your vacation leave due to a declared Local State of Emergency for Pandemic Influenza result in your leave going beyond the maximum accrual amount, a recommendation will be submitted to the City Manager that you be allowed to carryover vacation leave, per Personnel Manual Section 12.2.

[*The following is only for hourly employees whose approved compensatory time off is being rescinded:*]

- Employees eligible to accrue compensatory time off have a right to use it within a reasonable time of their request. However, such is not the case in the event of a declared Local State of Emergency, where your absence may disrupt City business operations. Employees eligible to receive overtime will have the choice of payment of overtime time worked in lieu of using compensatory time.

Thank you for your understanding and your assistance during this difficult time.