



# U·S AIRWAYS

No.

## *Maintenance Operations Union Business Authorization for IAMAW covered employees*

**To be completed by employee:**

Employee Name (Print) \_\_\_\_\_ Employee # \_\_\_\_\_

Dept./City \_\_\_\_\_ Classification \_\_\_\_\_ Shift \_\_\_\_\_

**Dates Requested off:**

Day	Date	Hour	W/O #	Explanation of Union Business
Mon.	/			
Tues.	/			
Wed.	/			
Thur.	/			
Fri.	/			
Sat.	/			
Sun.	/			
Mon.	/			
Tues.	/			
Wed.	/			
Thur.	/			
Fri.	/			
Sat.	/			
Sun.	/			

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

The Company has the right to approve or deny this request based on needs of service.

Approved

Denied

Supervisor/Foreman

(Print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

By signing below, the IAMAW agent authorizes US Airway to invoice the ☐ Local Lodge ☐ or the District Lodge for the hours listed above.

Local Lodge Authorization: (Print) \_\_\_\_\_

W/O # is 55XLOC Signature \_\_\_\_\_ Date \_\_\_\_\_

District Lodge Authorization: (Print) \_\_\_\_\_

W/O # is 55XDIS Signature \_\_\_\_\_ Date \_\_\_\_\_

DISTRIBUTION: WHITE-M&amp;E ADMIN., GREEN-M&amp;E ADMIN., YELLOW-LOCAL OR DISTRICT LODGE, PINK-STATION, GOLD-EMPLOYEE