

EMPLOYEE LEAVE REQUEST

Today's Date: (Except in cases of emerger	ncy, requests should be submitted <u>7 days in advance</u>)
Employee Name:	
Date(s) of Leave:	
	Check here if out for full day
Partial Day Leave	Time left: Time returned:
Employee Signatur	e:
Administrator's Ap	proval:
	TYPE OF LEAVE REQUEST: S SICK (PERSONAL/FAMILY) P PERSONAL LEAVE V VACATION (12 Month Employees only) L LEAVE WITHOUT PAY C COMP TIME N/A WORK WEEK ADJUSTMENT J JURY DUTY * B BEREAVEMENT LEAVE**
Reason For Leave:	

^{*}Jury Duty leave requires written supporting documentation before payment is authorized. The absence will not be charged to vacation or personal leave if you submit supporting documentation.

^{**}Employees are granted up to five days per year bereavement leave (death in your immediate family), which are not charged to your vacation, sick, or personal leave. Leave days beyond the five may be charged to sick, vacation or personal leave or may be taken without pay, upon Superintendent approval.