



# EMPLOYEE LEAVE REQUEST

Today's Date: \_\_\_\_\_

(Except in cases of emergency, requests should be submitted **7 days in advance**)

Employee Name: \_\_\_\_\_

Date(s) of Leave: \_\_\_\_\_

Total Leave (hours): \_\_\_\_\_

Class Period(s) Gone: [ 1st ] [ 2nd ] [ 3rd ] [ ALL DAY ]

Employee Signature: \_\_\_\_\_

Administrator's Approval: \_\_\_\_\_

## TYPE OF LEAVE REQUEST:

- V  VACATION (12 Month Employees only)
- P  PERSONAL LEAVE
- S  SICK (PERSONAL/FAMILY)
- L  LEAVE WITHOUT PAY
- C  COMP TIME
- N/A  WORK WEEK ADJUSTMENT
- J  JURY DUTY \*
- B  BEREAVEMENT LEAVE\*\*

Reason For Leave: \_\_\_\_\_

Substitute Needed: ( Y ) / ( N )

If yes, do you have a substitute in place? ( Y ) / ( N )

List name of substitute if known: \_\_\_\_\_

\*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..