

ABSENCE REQUEST

Date: _____

Approved: _____

Denied: _____

Employee: _____ Reason for Absence: _____
(Use Code)

Dates of Absence: _____
AM PM All Day (Circle One)

CODES

- A Accident on Duty
- F Death in Family
- J Jury Duty
- S Sick
- V Vacation
- L Leave of Absence
- PL Personal Leave
- PrL Professional Leave
- AL Association Leave
- ML Military Leave
- CL Comp Time Leave
- CW Comp Time Worked

Principal's Signature:

If "PrL" code is used, please name conference attended:

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Name of Substitute: _____

Address: _____

Phone: _____

Date(s) Substituted: _____

Total Number of Days: _____ District's Rate of Pay: _____

Amount Due: _____

Substitute's Signature