

**PERSONNEL DEPARTMENT
PERSONAL LEAVE
REQUEST FORM**

Employee's Name _____ Date: _____

Date(s) of requested leave: _____

I CERTIFY THAT I AM USING PERSONAL LEAVE IN ACCORDANCE WITH THE TERMS & CONDITIONS OF MY EMPLOYMENT CONTRACT.*

- _____ major disaster affecting immediate family property
- _____ closing of loans on property
- _____ court appearance
- _____ wedding of employee
- _____ immediate family receiving awards
- _____ immediate examination for military service
- _____ any business activity of major significance which cannot be handled before or after school or on a weekend
- _____ other (specify): _____

**Additional information may be required if valid reason exists for questioning*

I CERTIFY THAT THIS PERSONAL LEAVE IS NOT BEING USED IN VIOLATION OF THE TERMS & CONDITION OF MY CONTRACT OF EMPLOYMENT.

Employee's signature _____ Date _____

_____ Approved

_____ Not Approved

Supervisor _____

_____ Approved

_____ Not Approved

Superintendent _____

ADMINISTRATIVE USE ONLY:

Replacement Needed
_____ Yes
_____ No

Replacement Approved
_____ Yes
_____ No