Leave and Substitute Request Form

Rules for Annual Leaves

*Every eligible employee may use annual leave for any combination of illness, doctors' appointments, family business, childcare, or other personal needs. The District urges employees to use professional judgment in taking these days for reasons other than illness, medical appointments, or family emergency. Annual leave days are not vacation days and employees should not view them as such. They are in place in case of illness, emergency, or personal needs.

*Use of annual leave for reasons other than illness, medical appointment, or family emergency is <u>limited to two days per month</u>, and leaves must be approved by the employee's immediate supervisor one week in advance. Exceptions to this five day period may be given by a supervisor. <u>Annual leave day usage is subject</u> to availability of substitutes.

*Restrictions: Annual leave (with the exception of a verifiable illness or emergency) may not be used in conjunction with a scheduled school holiday, within two weeks of the beginning or end of the school year by district instructional staff and may not be taken during Parent/Teacher conferences on an inservice day. Any exception requires approval of the superintendent.

Employee Name_					
Dates of Request/Absences			Total number of days:		
Type of Leave (circle one) Annual (Illness) Annual (Personal)			Professional	Coaching	Other
If Professional or Fill out a PO onlin	Other, state ac ne if you need a	tivity: ny registratio	ns, meals or reserva	tions that require f	unding.
Will you need a su	abstitute: YES	NO Specif	ïc Request:		
All Day	AM only	PM only	Other		
What time does su	ıbstitute need t	o report:			
What hour is you	r planning (seco	ondary only):	1234567		
Duty Information	(What duties d	lo you have?)			
Employee Signature				Date	
Supervisor Signat	ture			<u>Date</u>	
Superintendent II	nitial				