

REQUEST FOR LEAVE OF ABSENCE – NON-CERTIFICATED STAFF

Applications for any of the following leaves are to be made through the supervisor. References made are to the Staff Handbooks to accompany Administrative Procedure 410.

Name: _____ School: _____

A. Compassionate Leave

I. *Death or Critical Illness in the immediate family - 5 days*

Dates Requested: From _____ to _____ (inclusively)

II. *Funeral of Aunt/Uncle/Niece/Nephew/Close Personal Friend of Employee or Spouse - up to 3 days*

Date(s) Requested: _____

Explanation: _____

B. Paternity Leave

To be taken the day of, or the day following, the birth of the child, should either day be a school day.

Date Requested: _____

C. Adoption of a Child

Up to 2 days

Date(s) Requested: _____

D. Jury Leave

(Jury stipend received for services to be submitted to the division.)

Date(s) Requested: _____

E. Illness of a Child, Spouse, Household Member

4 days per school year (unused sick days)

Date(s) Requested: _____

F. Convocation

1 day to attend the university convocation for daughter, son, spouse or self, with pay

Date(s) Requested: _____

G. Personal Leave

(Without Pay)

Leave of Absence (less than one week) – Principal Approval required.

Leave of Absence (greater than one week) – Associate Superintendent-Personnel Approval required.

Date(s) Requested: _____

Applicant's Signature

Supervisor's Signature

- NOTES:** (1) Should the leave be an emergency, inform your supervisor and complete this form as soon as possible.
(2) Requests for extended leave for illness, maternity, parental, or adoption require a letter to the Associate Superintendent-Personnel.