

REQUEST FOR LEAVE OF ABSENCE

Report absences in hours to the nearest ¼ hour (.25, .50, .75, 1.00 hours).

Except for sick leave and worker's compensation, this form must be completed in advance of taking a leave of absence and bear the signature of the employee's immediate supervisor.

Following completion of any related data entry, print a copy of the screen and attach it to the original signed form. Please *Do Not Forward* the original to the payroll department. Retain it in your departmental files for future leave corrections and/or adjustments. On-line leave adjustments will be entered by the payroll department. If an adjustment is necessary, use the original form to make the correction and send a copy of the corrected form to the payroll department.

CHECK DATE:			DEPARTMENT:		
REPORTING PERIOD			NAME:		
START:	END:				
LEAVE APPROVED			LEAVE ADJUSTMENT		
DATES	TYPE	HOURS	DATES	TYPE	HOURS

LEAVE TYPE CODES

- | | |
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| <p>VACA Vacation – Paid</p> <p>SICK Sick Day - Paid</p> <p>PERP Personal Day – Paid</p> <p>JURY Jury Duty – Paid</p> <p>PROF Professional Day – Paid</p> <p>DISB Extended Disability</p> <p>WCPD Worker's Comp (First 5 days Paid)</p> <p>MILT Military – Paid</p> | <p>PWOP Personal Day – Not Paid</p> <p>SWOP Sick Day – Not Paid</p> <p>LWOP Leave Without Pay</p> <p>HWOP Non-Paid Absence before or after a Holiday</p> <p>PRNP Professional Day – Not Paid</p> <p>FMLA Family and Medical Leave – Not Paid</p> <p>WCNP Worker's Comp (Starting from day 6 on)</p> <p>FMSK Family and Medical Leave – using Sick</p> <p>FMVA Family and Medical Leave – using Vacation</p> |
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Pursuant to Board Policies with implementing procedures, I hereby request to be absent from duty for the purpose(s) stated above. Also, if this absence is related to sick leave, this is to certify that the leave was necessary because of illness as determined by Board Policy 6Hx2-3.11 and that I am entitled to receive pay subject to having such leave accrued.

Date: _____ Signature of Employee: _____

Date:* _____ Approved by: _____

* Date must be prior to leave beginning date except for sick and worker's compensation.