



NOT REQUIRED FOR SICK, PROFESSIONAL DEVELOPMENT or CANCELLATION (classified only) LEAVES

NOTES: This form is to be used for requesting all staff absences listed below. These requests should be made in advance and prior approval is required. All Sick Leave and Cancellation (classified employees only) Leave is to be reported on the Staff Absence Report (Appendix-N). All requests for Professional Development Leave are done on PDP Toolbox and reported when completed on the Staff Absence Report (Appendix-N)

STAFF MEMBER: _____ REQUESTED DATE: ___ / ___ / ___

POSITION: _____ AT: ___ CCES ___ CCMS ___ CCHS ___ 284

- REASON: ___ Personal Leave
___ Discretionary Leave (USD 284 Teachers only)
___ Funeral Leave
___ Jury Leave
___ Unpaid Leave (_____)
___ Vacation (eligible staff members only)

LENGTH OF ABSENCE: ___ 1.0 Day
___ 0.5 Day (___ AM or ___ PM)

STAFF SIGNATURE: _____ DATE: ___ / ___ / ___

PRINCIPAL or DISTRICT SUPERVISOR APPROVAL
APPROVED ___ DENIED ___ (Reasons: _____)
BY: _____ DATE: ___ / ___ / ___

DISTRICT OFFICE VERIFICATION
PROCESSED BY: _____ DATE: ___ / ___ / ___