

# LEAVE NOTIFICATION

GOLDEN PLAINS U.S.D. NO. 316

NAME: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

DATES OF ABSENCE: \_\_\_\_\_ TOTAL HOURS: \_\_\_\_\_

TIME DEPARTED: \_\_\_\_\_ TIME RETURNED: \_\_\_\_\_

## EMPLOYEE'S REQUEST

For the following reason(s) I request to be absent or was absent on the date(s) and times indicated above:

- DISCRETIONARY LEAVE (These 13 days must be used before any Sick leave may be used)
- ILLNESS (SICK) LEAVE (To be used only after discretionary days are gone and only for sick)
- PROFESSIONAL LEAVE (Superintendent's & Professional Development Council permission)
- VACATION LEAVE
- OTHER REASONS \_\_\_\_\_ (Coaching, Trips w/students, etc.)

Personnel should refer to the negotiated agreement, certified staff handbook, classified staff handbook, or individual contract for definitions of the various leaves available. Some leaves require a statement of reason(s) for the leave. Please state the specific reason(s) if required.

\_\_\_\_\_

\_\_\_\_\_

Will a substitute be required?  Yes  No

If yes, who do you suggest? 1. \_\_\_\_\_  
2. \_\_\_\_\_

\_\_\_\_\_  
**Signature**

## ADMINISTRATIVE ACTION

- Superintendent's Action  Approved as requested
- Approved with exceptions as noted
- Not Approved for the following reason(s):

\_\_\_\_\_  
Superintendent's Signature: \_\_\_\_\_

