

EMPLOYEE FIRST NAME: \_\_\_\_\_

LAST NAME \_\_\_\_\_

EMP. # \_\_\_\_\_

School District No. 52 (Prince Rupert)
LEAVE OF ABSENCE FORM FOR P/VP AND EXEMPT
(REQUIRED when requesting leave from assigned position other than for Professional Development)

DATE: \_\_\_\_\_ SCHOOL/SITE: \_\_\_\_\_ POSITION: \_\_\_\_\_

Permission is requested for a leave of absence for Total Days Absent: \_\_\_\_\_ OR Total Hours Absent: \_\_\_\_\_

Date(s) of Absence: \_\_\_\_\_

PLEASE CHECK APPROPRIATE BOX

Table with columns: LEAVE TYPE, EXEMPT, PRINCIPALS/VPS. Rows include Short Term (Professional Development, Compensatory/Banked Time, Sick, Medical-referral, etc.) and Long Term (Annual/General, Partial, Maternity/Pregnancy, etc.).

LEAVE DETAILS (where required, see above): SUB REQUIRED: YES NO DATES: CHARGE TO:

Form must be received at the Board Office ONE WEEK PRIOR TO LEAVE (Bereavement, Sick & Family Illness excepted);

APPLICANT SIGNATURE SUPERVISOR SIGNATURE BOARD OFFICE USE ONLY APPROVAL GRANTED: YES NO NOTES: DATE: SIGNATURE

NOTE: PLEASE NOTIFY SCHOOL BOARD (624-6717) IF YOU CANCEL OR DO NOT ATTEND YOUR APPROVED ACTIVITY
A COPY OF THE APPROVED FORM WILL BE RETURNED TO THE APPLICANT