

**Shiawassee Regional Education Service District
Leave Request Form**

Directions:

1. Advanced notification is required. Authorization must be granted prior to the absence (except in cases of emergency).
2. Staff member requesting an absence must submit completed form to immediate supervisor.
3. Personal Business days must be submitted at least 48 hours in advance.

SECTION I: (REQUIRED)

Name of Person Requesting Leave _____

School/Department _____

Type of Leave Request (Check one):
 Sick (Complete Section II) Personal Business (Complete Section II) Association Day (Complete Section III) Curriculum/Prof. Dev. (Complete Prof. Dev. Request Form)
 Other (Complete Section III) Vacation/Misc. (Complete Section II) Jury Duty (Complete Section II) Personal Leave (Complete Section II) Funeral Day (Complete Section II) (relationship to employee)

SECTION II: Complete this section for Sick, Personal Business, Personal Leave, Vacation, Jury Duty, Hospital or Funeral Day.

Date(s)/Duration of Absence _____ # Hours _____ # Minutes _____

Supervisor Signature _____ Date _____

SECTION III: Complete this section for Other/Association Day(s). List Type _____

Signature of Supervisor _____ Approved/ Denied Date _____

Signature of Superintendent _____ Approved/ Denied Date _____

(* not required for Athletic Event or Field Trip)

Full Day A.M. Only P.M. Only

Sub Available No Sub Available (request denied) **Date(s) of Absence** _____

Signature of Employee _____ Date Submitted _____