

# WEST HEMPSTEAD UFSD

## REQUEST FOR VACATION OR PERSONAL DAYS Non-Teaching Personnel

Name: \_\_\_\_\_

Title: \_\_\_\_\_

School: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Date/s Requested: \_\_\_\_\_ Through: \_\_\_\_\_ # of Days: \_\_\_\_\_

Date/s Requested: \_\_\_\_\_ Through: \_\_\_\_\_ # of Days: \_\_\_\_\_

Date/s Requested: \_\_\_\_\_ Through: \_\_\_\_\_ # of Days: \_\_\_\_\_

**TOTAL # of Days Requested:** \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

**Please check one:**

Vacation

Personal Day

(Please check one)

Undisclosed Personal Emergency (*One allowed per school year*)

Other (*please state reason*)

**Reasons for Personal Day Requests:**

- Sickness in the immediate family or household.
- Legal or emergent personal matter which cannot be attended to outside of the school day.
- One of the days may be used for a private personal emergency and will be reported to the Superintendent of Schools in advance, if possible. The interpretation of personal emergency on this one day per year will be left to the personal integrity of the employee.

**Approvals:**

\_\_\_\_\_  
Supervisor (*Facilities Staff Only*) Date

\_\_\_\_\_  
Administrator (*Principal or Director*) Date

\_\_\_\_\_  
Assistant Superintendent Date  
for Business & Operations

**Head Custodians Only:**

\_\_\_\_\_  
Building Principal Date  
Acknowledgement