

EMPLOYEE LEAVE

EMPLOYEE NUMBER _____

EMPLOYEE NAME _____

EMPLOYEE TYPE CERTIFIED _____ CLASSIFIED _____

TOTAL DAYS ABSENT _____ DATE ABSENT _____

CLASSIFICATION OF ABSENCE

CODE

110 SICK LEAVE _____

115 PERSONAL LEAVE _____

147 LEAVE WITHOUT PAY _____

117 SICK LEAVE BANK _____

113 FAMILY LEAVE BANK _____

108 SHARED LEAVE _____

CODE

120 VACATION _____
(12 MONTH EMPLOYEES)

145 SCHOOL BUSINESS _____

146 PROFESSIONAL
DEVELOPMENT _____

130 JURY DUTY _____

135 MILITARY _____

EMPLOYEE SIGNATURE DATE

APPROVED _____ DISAPPROVED _____
PRINCIPAL/SUPERVISOR DATE

I was not absent during the month of _____, _____.
MONTH YEAR

EMPLOYEE SIGNATURE DATE

PRINCIPAL/SUPERVISOR DATE