

PERSONAL LEAVE REQUEST FORM  
NON-CERTIFIED EMPLOYEES

NAME \_\_\_\_\_

DATE \_\_\_\_\_

Twelve month fulltime non-certified staff members will receive three (3) personal leave days per year. Nine month full-time employees shall receive two (2). Such personal leave days shall be used only for business or family matters that require the staff member's presence during the school days and are of such nature that they cannot be transacted at another time, such as weekends, after school hours, or during vacations. Notification of such leave days shall be submitted to the superintendent at least two (2) days in advance of the absence, except in the case of an emergency when the explanation may be submitted after the absence. The day immediately preceding or immediately following a legal school holiday or a school vacation period shall not be recognized as a personal leave day, except in cases of emergency which the superintendent determines are legitimate. No personal days may be used after May 15 for the school year for employees without the consent of the superintendent. Unused personal days shall accumulate as unused sick days at the end of each school year.

In addition to these personal leave days, non-certified staff members will receive (2 or 3) "at cost" personal leave days. Staff members may use these days for any reason they deem legitimate, but they must reimburse the district the full cost for a substitute for the days used. The same notification and restricted use requirements apply as listed above.

_____	Personal Leave
Date (s) Requested	
_____	Emergency Leave
Date (s) Requested	
_____	"At Cost" Personal Leave
Date (s) Requested	

\_\_\_\_\_  
Employee Signature/Date

\_\_\_\_\_  
Immediate Supervisor Signature/Date  
\_\_\_ Approved \_\_\_ Not Approved

\_\_\_\_\_  
Superintendent/Date  
\_\_\_ Approved \_\_\_ Not Approved

Reason(s) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_