
DATE: _____

In accordance with the contractual agreement with the Board of Education, I intend to take:

____ 1/2 personal leave day _____

(Date)

____ full personal leave day(s) _____

(Date(s))

I acknowledge that this business cannot be conducted on other than a school day, and is not related to “recreational pursuit, economic gains, other employment, seeking new employment, marriage”.

Please print or type name

Signature of Staff member

Please indicate whether TEACHER or CSEA: TEACHER _____ CSEA _____

Please indicate whether a substitute is necessary: YES _____ NO _____

I would like to request: _____ as a substitute.

Please print or type name
