



TEACHER REQUEST FOR UNPAID DAY(S)

Employee Name: _____

Date: _____

Employee No.: _____

Primary Building Location: _____

I am requesting _____ days of unpaid leave.

I am aware this absence may affect future claims for retirement and possibly other benefits.

Reason for request: _____

Dates I am requesting unpaid leave are:

1.) _____ 2.) _____ 3.) _____

Employee Signature: _____

Date: _____

Principal's Signature: _____

Date: _____

Asst. Supt./ Human Resources: _____

Date: _____

**WEB FORM / DISTRIBUTION BY HUMAN RESOURCES
HR / PAYROLL / EMPLOYEE**