

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 claim	s 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:

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