

EMPLOYEE NUMBER _____

CONNEAUT AREA CITY SCHOOLS

Request for Certified Personal Leave

Requested by: _____

With Pay () Without Pay ()

Date of Request: _____

Date and Time of Leave: _____ If taking a 1/2 of a day, please state AM or PM.

Procedure:

1. Submit in advance, whenever possible, to principal.
2. Submitted to superintendent by principal
3. Superintendent returns request to building principal.
4. Building principal returns request to applicant.

APPROVED ()

NOT APPROVED ()

Principal/Date

Superintendent/Date

OFFICE USE ONLY: This is the number of personal days used so far, including this request: .5 1 1.5 2 2.5 3

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