

EMPLOYEE NUMBER \_\_\_\_\_

CONNEAUT AREA CITY SCHOOLS

**PERSONAL LEAVE REQUEST**

**CLASSIFIED PERSONNEL**

Each classified employee is allowed three days of personal leave without loss of pay to transact items of personal business which cannot be conducted outside the employee's work day. Any requests for use of these days should be filed as far in advance as possible.

I hereby request \_\_\_\_\_ day(s) of personal leave ( )with pay ( )without pay to be used on this date(s):\_\_\_\_\_ If taking a 1/2 of a day, please state AM or PM.

\_\_\_\_\_  
Employee Signature      Print Name      Date of Request      Supervisor/Date

- ( ) APPROVED
- ( ) NOT APPROVED

\_\_\_\_\_  
Date Signed      Superintendent

**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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