

# APPLICATION FOR LEAVE OF ABSENCE

Please check one:

- Professional Meeting                       Release Time                       Field Trip  
 Jury Duty                      **(Reminder – Please submit payment form from Clerk of Courts)**

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Name \_\_\_\_\_ Date of Application \_\_\_\_\_  
Position \_\_\_\_\_ Building \_\_\_\_\_  
Date(s) of Absence \_\_\_\_\_ Location of Workshop/Meeting \_\_\_\_\_  
Reason for Absence \_\_\_\_\_

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Estimate of Expenses (if applicable):  
**Refer to Board Policy 6550 and Guidelines regarding travel**

Food	_____	Funded by:
Hotel	_____	<input type="checkbox"/> Building / Dept. PD Fund
Mileage	_____	<input type="checkbox"/> Title I
Registration Fee	_____	<input type="checkbox"/> Title II A
Total	_____	<input type="checkbox"/> Other

\_\_\_\_\_  
Signature of Employee

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<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____	_____
	Principal / Supervisor	Date
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____	_____
	Superintendent	Date

Original:      Payroll  
Copy to:      Employee  
                    Principal/Supervisor