

## EMPLOYEE ABSENCE FORM

### EMPLOYEE SECTION

**EMPLOYEE NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**POSITION:** \_\_\_\_\_

**REQUESTED LEAVE DATE(S):** \_\_\_\_\_

☐ AM ☐ PM ☐ FULL DAY ☐ HOURS \_\_\_\_\_

**SUBSTITUTE NEEDED:** ☐ NO ☐ YES

Note: You must call Will Sub if a substitute is needed

#### TYPE OF LEAVE:

☐ DISCRETIONARY

☐ SCHOOL BUSINESS/CONFERENCE

☐ FUNERAL: \_\_\_\_\_ RELATIONSHIP

☐ JURY DUTY/COURT

☐ PERSONAL

☐ SICK

☐ VACATION

☐ FMLA LEAVE

### BUILDING USE ONLY

☐ Received, Date: \_\_\_\_\_ ☐ Unapproved, Reason: \_\_\_\_\_

☐ Other: \_\_\_\_\_

**AUTHORIZED SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**\*\*Route to Central Office\*\***

### CENTRAL OFFICE USE

☐ Received, Date: \_\_\_\_\_ ☐ Unapproved, Reason: \_\_\_\_\_ ☐ Unpaid

☐ Other: \_\_\_\_\_

**AUTHORIZED SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

### ROUTING

Route signed copy back to: ☐ Employee ☐ Building Administrator ☐ Payroll