APPLICATION FOR LEAVE OF ABSENCE

Please che	<u>ck one:</u>				
Profes	sional Meeting	Release Time	☐ Fie	ld Trip	
Jury D	uty (Reminder –	Please submit payment form from	Clerk of Courts)		
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Name			Date of Application		
Position		Build	Building		
Date(s) of Ab	sence	Location of Worl	shop/Meeting		
Reason for A	bsence				
* * * * * * * *	* * * * * * * * * * * * *	*******	* * * * * * * * * * * * * * * * *	* * * * * *	
	expenses (if applicab Policy 6550 and Guide	•			
Food			Funded by:		
Hotel			Building / Dept. PD Fu	lding / Dept. PD Fund	
Mileage			Title I		
Registration I	Fee		Title II A		
Total			Other		
		Signature of Emp	oloyee		
		· ·	•		
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Approve	ed Denied				
лррготс	,a Berned	Principal / Supervisor	 Date		
☐ Approve	ed Denied				
☐ Approved ☐ Denied		Superintendent	Date		
Original: Copy to: 9/19/17	Employee Employee Principal/Supervisor Treasurer (If Expens				