

EMPLOYEE FIRST NAME:

LAST NAME

EMPLOYEE #

School District No. 52 (Prince Rupert)

LEAVE OF ABSENCE FORM

(REQUIRED when requesting leave from assigned position other than for Professional Development)

DATE: SCHOOL/SITE: POSITION:

Permission is requested for a leave of absence for Total days absent: OR Total Hours Absent:

Date(s) of Absence:

LEAVE TYPE

PLEASE CHECK APPROPRIATE BOX

PRDTU

Short Term:

- Bereavement Leave (details required)
Board Discretionary
Compensatory - Stat Holiday for part-time teacher
Curriculum based / District Initiated (details required)
Extra-Curricular (details required)
Funeral (details required)
Illness of a family member (details required)
Jury Duty (details required)
Other (details required)
Personal Leave (details required)
Sick
Union Business
Village Leave

Long Term

- Annual / General Leave (details required)
Child Raising Leave (details required)
Maternity / Pregnancy Leave (details required)
Other (details required)
Parental Leave (details required)
Partial Leave (details required)

Where applicable, cost of replacement will be charged to employee unless otherwise stated.

LEAVE DETAILS (where required, see above):
SUB REQUIRED: YES NO
DATES:
CHARGE TO:

Form must be received at the Board Office ONE WEEK PRIOR TO LEAVE (Bereavement, Sick & Family Illness excepted);

APPLICANT SIGNATURE
SUPERVISOR SIGNATURE (acknowledgement of leave request)
BOARD OFFICE USE ONLY
APPROVAL GRANTED: YES NO
DATE: SIGNATURE

NOTE: PLEASE NOTIFY SCHOOL BOARD (624-6717) IF YOU CANCEL OR DO NOT ATTEND YOUR APPROVED ACTIVITY
A COPY OF THE APPROVED FORM WILL BE RETURNED TO THE APPLICANT