

EMPLOYEE ABSENCE

(Administration and Central Office Personnel)

No. of days: _____

Dates: _____

Reason: _____

Name: _____

Location/School: _____

Position: _____

Employee's Signature

Superintendent's Signature

PAYROLL RECORD:

| | | | |
|----|----------------------------|------|---|
| PL | Personal Leave | SL | Sick Leave (Self) |
| SF | Sick Family | SF | Sick outside home (where obligation warrants) |
| NP | Absence without pay | VA | Vacation |
| IN | In-Service or Conference | FI | Funeral immediate family |
| FO | Funeral—Other (Sick Leave) | | Relationship: _____ |
| WC | Worker's Compensation | JURY | Jury duty |

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