

# Polo Community School District #222

## Personal Leave Request

The following form is interactive. You may fill it out on-line but it can not be saved. You will need to print the finished form and submit it to your building office or the central office.

### Instructions

- 1) Type in your name and the date(s) for the requested absence.
- 2) Indicate whether the absence is full or half day, am or pm, and if a substitute is needed.
- 3) Indicate the type of leave requested. If requesting Sick Leave, indicate the specifics. If requesting Professional Leave, fill in the remaining data.
- 4) Only the second page needs to be printed, but be sure to sign and date the form.

### Summary of Board Policy Concerning Leave

Staff members are granted two (2) Personal Leave days per year. Teachers with 10 or more years of continuing service in the district may accumulate leave to three (3) days.

The use of a **PERSONAL DAY** is subject to the following conditions:

1. Requests for leave shall be considered in the order they are received in the central office. Written, advanced notice of the necessity for personal leave shall be submitted to the Superintendent or his/her designee as soon as possible, but not less than twenty-four hours before the requested leave day.
2. No personal leave days may be used to extend winter or spring break.
3. Personal leave used to extend holidays and holiday weekends will be limited to one day per request.
4. Personal leave may not be used in increments of less than one-half day.
5. Personal leave days are subject to a substitute's availability.
6. Personal leave days may not be used during the first week or last week of the school year.
7. Personal leave days may not be used on conference or semester exam days.
8. Personal leave may not be used by more than 10% of the teaching staff in each building at the same time.
9. Teachers with more than ten years of continuing service may use one personal leave day for childrearing activities, excluding vacations, without other restriction applied.
10. The Superintendent or his/her designees may waive all restrictions, including the twenty-four hour notice, when in his/her sole judgment a unit member's explanation of the request represents a hardship and/or an emergency. The explanation of the necessity for emergency leave shall be confirmed in writing at the employee's earliest opportunity.

A maximum of five (5) sick days sick leave shall be granted for bereavement for the death of a member of the immediate household and/or parents, step-parents, children, step-children, sons-in-law, and daughters-in-law. In the event the fifth day terminates on Wednesday or Thursday, the remainder of the week will be granted, if requested.

Bereavement time for other members of the "immediate family" shall be granted upon request through the day of the funeral. Up to one day of sick leave shall be granted, upon request, for the day of the funeral for relatives not previously covered in the Article. Up to one-half day sick leave shall be granted, upon request, for the day of the funeral of non-relatives not previously covered in the Article. The granting of additional time shall be considered when travel time is a significant consideration, and shall be decided at the sole discretion of the Superintendent, and his/her decision shall be final.

Board Policy 5:250

## Polo Community School District #222

### ABSENCE REQUEST

Employee: \_\_\_\_\_

Date of Absence: \_\_\_\_\_

Full Day                       Half Day (AM)                       Half Day (PM)

Sub Needed?                       Yes                       No

#### **Reason:**

Sick/Bereavement Leave

Illness

Relationship \_\_\_\_\_

Medical Appt

Dental Appt

Injury

Relationship \_\_\_\_\_

Maternity Leave

Death in Family/Funeral

Relationship \_\_\_\_\_

Other:

\_\_\_\_\_

Professional Leave

Name/ Type of Meeting: \_\_\_\_\_

Registration Fee: \_\_\_\_\_ Estimated Mileage: \_\_\_\_\_ miles

Please include a brief description and/or a brochure of the conference:

(Reimbursement guidelines are established in Board Policy 5:60-AP.)

Jury Duty

Personal Leave

Vacation Leave

Unpaid (Dock) Leave

Employee \_\_\_\_\_

Date \_\_\_\_\_

Principal \_\_\_\_\_

Date \_\_\_\_\_

Superintendent \_\_\_\_\_

Date \_\_\_\_\_