

PUBLIC SCHOOL FACILITIES AUTHORITY – Leave Request Form

(Leave must be requested in advance, except for unforeseen or emergency circumstances.)

Week Ending (Friday) _____

Employee Name:		Empl ID:		Division:	
TYPE OF LEAVE REQUESTED <small>(one type per row)</small>	<input type="checkbox"/> Annual	<input type="checkbox"/> Educational Leave Paid		<input type="checkbox"/> Administrative Leave* ⁴ - Requires Comment	
	<input type="checkbox"/> Sick* ¹	<input type="checkbox"/> Voting Time		<input type="checkbox"/> Jury Duty/ Court Leave* ⁵	
	<input type="checkbox"/> Personal Leave Day	<input type="checkbox"/> Workers Comp Paid		<input type="checkbox"/> Donated Annual/Sick Leave* ⁶	
	<input type="checkbox"/> Comp Time	<input type="checkbox"/> Bereavement Leave* ³		<input type="checkbox"/> Other- Requires Comment	
	<input type="checkbox"/> Auth. Leave W/O Pay* ²				
Supervisor's Initials	# of Hours	Beginning Date	Time:	Date of Request:	
		Ending Date	Time:		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <small>(requires comment)</small>					
TYPE OF LEAVE REQUESTED <small>(one type per row)</small>	<input type="checkbox"/> Annual	<input type="checkbox"/> Educational Leave Paid		<input type="checkbox"/> Administrative Leave* - Requires Comment	
	<input type="checkbox"/> Sick*	<input type="checkbox"/> Voting Time		<input type="checkbox"/> Jury Duty/ Court Leave*	
	<input type="checkbox"/> Personal Leave Day	<input type="checkbox"/> Workers Comp Paid		<input type="checkbox"/> Donated Annual/Sick Leave*	
	<input type="checkbox"/> Comp Time	<input type="checkbox"/> Bereavement Leave*		<input type="checkbox"/> Other- Requires Comment	
	<input type="checkbox"/> Auth. Leave W/O Pay*				
Supervisor's Initials	# of Hours	Beginning Date	Time:	Date of Request:	
		Ending Date	Time:		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <small>(requires comment)</small>					
TYPE OF LEAVE REQUESTED <small>(one type per row)</small>	<input type="checkbox"/> Annual	<input type="checkbox"/> Educational Leave Paid		<input type="checkbox"/> Administrative Leave* - Requires Comment	
	<input type="checkbox"/> Sick*	<input type="checkbox"/> Voting Time		<input type="checkbox"/> Jury Duty/ Court Leave*	
	<input type="checkbox"/> Personal Leave Day	<input type="checkbox"/> Workers Comp Paid		<input type="checkbox"/> Donated Annual/Sick Leave*	
	<input type="checkbox"/> Comp Time	<input type="checkbox"/> Bereavement Leave*		<input type="checkbox"/> Other- Requires Comment	
	<input type="checkbox"/> Auth. Leave W/O Pay*				
Supervisor's Initials	# of Hours	Beginning Date	Time:	Date of Request:	
		Ending Date	Time:		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <small>(requires comment)</small>					
TYPE OF LEAVE REQUESTED <small>(one type per row)</small>	<input type="checkbox"/> Annual	<input type="checkbox"/> Educational Leave Paid		<input type="checkbox"/> Administrative Leave* - Requires Comment	
	<input type="checkbox"/> Sick*	<input type="checkbox"/> Voting Time		<input type="checkbox"/> Jury Duty/ Court Leave*	
	<input type="checkbox"/> Personal Leave Day	<input type="checkbox"/> Workers Comp Paid		<input type="checkbox"/> Donated Annual/Sick Leave*	
	<input type="checkbox"/> Comp Time	<input type="checkbox"/> Bereavement Leave*		<input type="checkbox"/> Other- Requires Comment	
	<input type="checkbox"/> Auth. Leave W/O Pay*				
Supervisor's Initials	# of Hours	Beginning Date	Time:	Date of Request:	
		Ending Date	Time:		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <small>(requires comment)</small>					
Employee Signature		Supervisor Signature		Date	
Final Authority				Date	

¹ Supervisors may request a doctor's statement, if more than two consecutive sick days are taken without prior approval.

² Auth. Leave W/O Pay means an employee failed to appear for work or leaving work without approval, or does not have available leave, and may require disciplinary action.

³ Bereavement leave requires approval by the agency Director.

⁴ Administrative leave requires approval by the agency Director.

⁵ Jury Duty/Court leave requires court documentation or subpoena attached to this form or in the employee file.

⁶ Donated leave requires specific approvals and certification which must be on file.