

MESA VISTA CONSOLIDATED SCHOOL DISTRICT

REQUEST FOR LEAVE FORM

TYPE OF REQUEST:

ANNUAL LEAVE [] LEAVE [] RELEASE TIME [] BEREAVEMENT LEAVE [] JURY DUTY []
PROFESSIONAL LEAVE [] (Professional Leave must be requested 10 days prior to activity or leave
Will be denied and a Copy of the Agenda Must Be Attached)

- [] I will be requesting a school vehicle, however, if a school vehicle is not available,
the School District will reimburse me for the trip (Attach School Vehicle Request Form)
[] I will be using my own vehicle and understand that I cannot claim mileage for this trip

Date(s) of Requested Leave:
Number of Requested Days:
Number of Requested Hours: Time:

Print Name of Employee: Date Signed:
Employee Signature: Date Signed:
Substitute Teacher for Instructor/Staff or Person In Charge for Principal:

[] Approved
[] Disapproved Date:
Immediate Supervisor

Reason, if Disapproved:

[] Approved
[] Disapproved Date:
Superintendent or Designee

Reason, if Disapproved:

ANNUAL LEAVE: Requires prior approval from Immediate Supervisor and Superintendent (Applicable to 12-month
Employees ONLY)
RELEASE TIME: If exceeding 40 hours a week or more, this will require prior approval of the Superintendent for
exceeding the weekly hours and for allowing Release Time credit.
BEREAVEMENT LEAVE: Applicable to death in the immediate family ONLY (Wife, Husband, Father, Mother, Son,
Daughter, Sister, Brother, Grandmother, Grandfather) In-law provisions shall apply to same. Up
to three (3) days are allowed upon written request, immediately following the death, as per
adopted Board Policy G.55.
PROFESSIONAL LEAVE: Applies only when directed by Immediate Supervisor and/or Superintendent to attend school
related functions/business (workshops, conferences, etc. (MUST BE REQUESTED 10 DAYS PRIOR
TO EVENT AND AGENDA MUST BE ATTACHED)
LEAVE Other Leave - For example: Sick Leave, Personal Leave, Family Medical Leave

NON-COMPLIANCE: SALARY DEDUCTION WILL APPLY