

# TEACHER ABSENCE DAY

## PTO/BEREAVEMENT/JURY DUTY

Please supply the necessary information and return the completed form to the Building Administrator. When the absence is planned (i.e. doctor's appointment) please send this form to the office at least one day prior to absence, otherwise on the day you return to work.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_ Paid Time Off (dates) \_\_\_\_\_ through \_\_\_\_\_

\_\_\_\_\_ Bereavement (dates) \_\_\_\_\_ through \_\_\_\_\_

Relationship to deceased (refer to contract) \_\_\_\_\_

\_\_\_\_\_ Jury Duty (dates) \_\_\_\_\_ through \_\_\_\_\_

(Refer to contract under Legal Leave)

\_\_\_\_\_  
Employee Signature

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\_\_\_\_\_  
Building Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Payroll

\_\_\_\_\_  
Date