**2024-2025 School Year**

**Personal Day Request Form**

**Employee Information:**

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

**Employee ID**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School/Department**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position/Title**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Day Requests:** Please indicate the date(s) for which you are requesting personal days during the 2024-2025 school year. You are entitled to a total of 5 personal days for this school year.

1. **Personal Day #1 Request (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date of Request: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve \_\_\_\_\_\_\_\_ Deny

Date of Approval/Denial: \_\_\_\_\_\_\_\_\_ Administrator’s Reason for Denial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Appeal: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve Appeal \_\_\_\_\_\_\_\_ Deny Appeal

Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Personal Day #2 Request (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_**

Date of Request: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve \_\_\_\_\_\_\_\_ Deny

Date of Approval/Denial: \_\_\_\_\_\_\_\_\_ Administrator’s Reason for Denial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Appeal: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve Appeal \_\_\_\_\_\_\_\_ Deny Appeal

Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Personal Day #3 Request (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_**

Date of Request: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve \_\_\_\_\_\_\_\_ Deny

Date of Approval/Denial: \_\_\_\_\_\_\_\_\_ Administrator’s Reason for Denial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Appeal: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve Appeal \_\_\_\_\_\_\_\_ Deny Appeal

Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Personal Day #4 Request (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_**

Date of Request: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve \_\_\_\_\_\_\_\_ Deny

Date of Approval/Denial: \_\_\_\_\_\_\_\_\_ Administrator’s Reason for Denial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Appeal: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve Appeal \_\_\_\_\_\_\_\_ Deny Appeal

Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Personal Day #5 Request (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_**

Date of Request: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve \_\_\_\_\_\_\_\_ Deny

Date of Approval/Denial: \_\_\_\_\_\_\_\_\_ Administrator’s Reason for Denial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Appeal: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Approve Appeal \_\_\_\_\_\_\_\_ Deny Appeal

Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Important Notes:**

* The 5 personal days are included as a part of the allotted sick time leave and are not in addition to that amount. (10 sick days for 10-month staff & 12 sick days for 12-month staff)
* Personal day requests must also be documented & approved in Absence Management/AESOP.
* It is the employee’s responsibility to retain a copy of this form for documentation purposes.
* Requests shall be submitted to building or department administrator(s) and may be denied based on operational requirements.
* Personal days must be requested **at least** three (3) work days in advance. There are no exceptions.
* The employee **is not** required to provide a reason for the personal day(s) request.
* The administrator **is required** to provide a reason for a personal day(s) request denial.
* If an employee chooses to appeal the denial of a personal day request, it is the employee’s responsibility to email a copy of the Personal Day Request form to Celeste Bunting, Director of Personnel, at celeste.bunting@irsd.k12.de.us in a timely manner for consideration.

By signing below, I acknowledge that I have read and understand the personal day policy and the guidelines for requesting personal days.

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_