



# ALUM ROCK UNION ELEMENTARY SCHOOL DISTRICT

## PERSONAL LEAVE OF ABSENCE

**TO:** Director, Human Resources  
**FROM:** \_\_\_\_\_  
**EMPLOYEE ID#:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_

Certificated       Classified

I am requesting a personal leave of absence from my \_\_\_\_\_ position  
 at \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
School/Department                                  Beginning Date

\_\_\_\_\_ .  
Ending Date

The reason for my personal leave of absence request is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I may be reached at:

\_\_\_\_\_ Address  
 \_\_\_\_\_  
 \_\_\_\_\_ City                                  State                                  Zip  
 \_\_\_\_\_  
 \_\_\_\_\_ Area code and phone number

*I certify that this is executed by me voluntarily and of my own free will.*

<i>Employee's Signature</i>	<i>Date</i>
<i>Supervisor's Signature</i>	<i>Date</i>
<i>Director, Human Resources Department</i>	<i>Date</i>

Approved       Denied