



Human Resources

300 Southwest Seventh Street | Renton, WA 98057-2307
425.204.2300 (phone) | 425.204.2416 (fax)
www.rentonschools.us

- Initial Request
- Extension

REQUEST FOR EXTENDED LEAVE

(NON-MEDICAL LEAVES)

Employee's Name: _____ Date: _____

Work Location(s): _____ Position: _____ Current Hours or FTE: _____

TYPE OF LEAVE:

- Family Emergency
- Judicial
- Education
- Job Share
- Other

Partial FTE Reduction: Current Contract FTE: _____ Requested Leave FTE: _____

Duration of Leave: Begin Leave Date: _____ End Leave Date: _____

Describe the circumstances of your request to take leave from your assignment:

Employee Signature _____ Date _____

Principal or Supervisor Signature _____ Date _____

Principal/Supervisor signature only indicates acknowledgement and is not an indication of approval. Approval or denial will be sent from Human Resources.

HUMAN RESOURCES WORK AREA

- Request Approved
- Request Denied

Comments:

Human Resources Administrator Signature _____ Date _____

Letter Staffing Profile Custom Form Board Docs