

**GATEWAY REGIONAL SCHOOL DISTRICT  
ADVANCE REQUEST FOR ABSENCE**

**ADMINISTRATION & NON-UNION**

I \_\_\_\_\_ am requesting:  
Name of Employee

A personal day on \_\_\_\_\_  A half personal day on \_\_\_\_\_

A sick day on \_\_\_\_\_  A half sick day on \_\_\_\_\_

A vacation day on \_\_\_\_\_  A half vacation day on \_\_\_\_\_

A religious holiday on \_\_\_\_\_  A half religious holiday on \_\_\_\_\_

A comp day on \_\_\_\_\_  A half comp day on \_\_\_\_\_

A bereavement day on \_\_\_\_\_  A half bereavement day on \_\_\_\_\_

Jury duty on \_\_\_\_\_ (attach copy of jury duty notice)

A professional day on \_\_\_\_\_  A half professional day on \_\_\_\_\_

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

To be absent without pay on \_\_\_\_\_

\_\_\_\_\_  
Signature of Staff Member

\_\_\_\_\_  
Date Requested

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date Approved

\_\_\_\_\_  
Signature of Superintendent

\_\_\_\_\_  
Date Approved