

Dry Creek Joint Elementary School District
Certificated Substitute
Request for Paid Sick Leave

Legal Name: _____

Pay Period: _____

Date Requested: _____				
Job Confirmation # _____				
AM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
AM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
PM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
PM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
Total Day	7.00 Hrs			

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AM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
PM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
PM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
Total Day	7.00 Hrs			

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PM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
PM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
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Instructions/example

Certificated substitutes must accept jobs as half or full days. Healthy Families Act allows employees to take time on an hourly basis. This means during a 4-hour shift (either AM or PM) an employee can choose to use accrued sick leave for this shift, unpaid time, or a combination of both.
Example: Employee has 1.75 hours of sick leave accrued. Employee is absent from PM shift. Employee can elect to have 1.75 hours paid as sick leave and the remainder as unpaid time, or the employee can elect to have the full shift unpaid.

AM	1.75 Hrs	<input checked="" type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
AM	1.75 Hrs	<input checked="" type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
PM	1.75 Hrs	<input type="checkbox"/> Worked	<input checked="" type="checkbox"/> HFA Sick Leave	<input type="checkbox"/> Unpaid
PM	1.75 Hrs	<input type="checkbox"/> Worked	<input type="checkbox"/> HFA Sick Leave	<input checked="" type="checkbox"/> Unpaid
Total Day	7.00 Hrs			

 Signature