

ALEXANDER COUNTY SCHOOLS
TEACHER LEAVE REQUEST FORM

Request for In-Service Absence (4)

Workshops, community responsibilities, approved meetings or assignments, jury duty, school related court attendance, participation in in-service projects conducted by the LEA, suspension with pay, military leave, injury during episode of violence, observance of bona fide religious holidays

Request for Professional Responsibility Absence (5)

Other absences with **deductions**. Professional responsibility, attendance at professional meeting, community responsibility

Name _____ School _____

Date(s) of Leave _____ Full or Half Day? _____

(If half, indicate AM/PM) _____ Substitute Needed? _____

Title of Program, Conference, Workshop, Etc. _____

Location (City, State) _____ Estimated Mileage (for reimbursement) _____

Estimated Cost for Lodging and Meals _____ (Original lodging receipt must be attached to reimbursement request)

Registration amount _____ (Original registration receipt must be attached to reimbursement request)

The registration includes: Meals (specify) _____

Materials (specify) _____

Other (specify) _____

Please indicate below how your attendance at this workshop/meeting will address the goals and strategies identified on your Individual Growth Plan. Attach an additional sheet if necessary.

Justification: If the registration fee is more than \$50, a written statement from the principal/supervisor must be completed. This statement should justify the expenditure by relating the in-service to the specific school/program need.

Source of Funds _____

Submitted By: _____ Date: _____

Approved By: _____ Principal Date: _____

_____ Director of Program Area Date: _____

_____ Superintendent or Designee Date: _____

YOUR APPROVED LEAVE REQUEST FORM MUST BE ATTACHED TO YOUR REIMBURSEMENT REQUEST.

Code: Substitute _____ approved for the following:

Sub _____

Registration _____

Other _____

Travel and Subsistence _____