

Personal Leave Request Form and Statement

In accordance with the guidelines listed below, I, _____,
am requesting _____ day(s) of Personal Leave on _____ (date).

All twelve (12) month classified employees of the Russell Independent School District shall be entitled to three (3) days of Personal Leave per school year and less than twelve (12) month classified employees shall be entitled to two (2) days of personal leave with pay each school year without affecting emergency or sick leave day totals. These days are equivalent to the normal working day of the employee and may be taken in not less than four (4) one-half (1/2) days. Those employed less than a full day will receive their pro-rata share. These days may be used subject to the following guidelines:

1. The Superintendent or designee must approve the leave date, but no reasons shall be required for the leave. Those employees making the earliest application shall be given preference.
2. No more than five percent (5%) of the system's classified employees may take Personal Leave on a given day. If requests exceed five percent (5%), those making the earliest application will be given preference.
3. Employees taking Personal Leave must file a Personal Leave Statement on their return to work stating that the leave was personal in nature.
4. On June 30, all Personal Leave days not taken during the current school year shall be transferred and credited to the employee's accumulated Sick Leave account.

I understand that if I have provided information that is not true, I may be subject to disciplinary action.

SIGNED _____

DATE _____ TIME _____

SCHOOL _____

APPROVAL (Signature Required):

PRINCIPAL/SUPERVISOR _____

PAYROLL CLERK _____

SUPERINTENDENT/DESIGNEE _____

A personal statement is required for the use of personal leave.

LEAVE STATEMENT
(KRS 161.154)

I am submitting this request for the use of leave for the following purpose(s) (check applicable boxes); that the facts supporting the request for leave as indicated below are true and correct; and that to the best of my knowledge, information, and belief, I am qualified for the leave requested pursuant to applicable state statute and Board policy.

- ☐ - Personal leave in compliance with and subject to qualifications set forth in Policy 03.2231.
This leave is personal in nature. Date(s): _____

Employee's Signature

Date

Employee's Name (Print or Type)

Review/Revised: 6/26/2023

Personal Leave Request Form and Statement

In accordance with the guidelines listed below, I, _____,
am requesting _____ day(s) of Personal Leave on _____ (date).

All full-time certified employees of the Russell Independent School District shall be entitled to three (3) days of Personal Leave per school year without affecting emergency or sick leave day totals. These days are equivalent to the normal working day of the employee and may be taken in not less than four (4) one-half (1/2) days. Those employed less than a full day will receive their pro-rata share. These days may be used subject to the following guidelines:

1. The Superintendent or designee must approve the leave date, but no reasons shall be required for the leave. Those employees making the earliest application shall be given preference. Approval shall be contingent upon the availability of qualified substitute employees.
2. No more than five percent (5%) of the system's certified employees may take Personal Leave on a given day. If requests exceed five percent (5%), those making the earliest application will be given preference.
3. Employees taking Personal Leave must file a Personal Leave Statement on their return to work stating that the leave was personal in nature.
4. On June 30, all Personal Leave days not taken during the current school year shall be transferred and credited to the employee's accumulated Sick Leave account.

I understand that if I have provided information that is not true, I may be subject to disciplinary action.

SIGNED _____
DATE _____ TIME _____
SCHOOL _____

APPROVAL (Signature Required):

PRINCIPAL/SUPERVISOR _____

PAYROLL CLERK _____

SUPERINTENDENT/DESIGNEE _____

A personal statement is required for the use of personal leave.

LEAVE STATEMENT (KRS 161.154)

I am submitting this request for the use of leave for the following purpose(s) (check applicable boxes); that the facts supporting the request for leave as indicated below are true and correct; and that to the best of my knowledge, information, and belief, I am qualified for the leave requested pursuant to applicable state statute and Board policy.

- ☐ - Personal leave in compliance with and subject to qualifications set forth in Policy 03.1231.
This leave is personal in nature. Date(s): _____

Employee's Signature

Date

Employee's Name (Print or Type)

Review/Revised: 6/26/2023