

REQUEST FOR STATE PERSONAL DISCRETIONARY LEAVE

Employee's Printed Name

Date

Campus/Department

Position

Number of discretionary leave day(s) requested: _____

Date(s) of discretionary leave day(s) requested (3 maximum): 1) _____ 2) _____ 3) _____

Definition

Discretionary personal leave is defined as available state personal leave taken at the employee's preference.

Use of Discretionary Leave

A written request for use of discretionary leave or personal leave must be submitted to the employee's immediate supervisor at least **five days in advance** of the anticipated absence.

Not for personal illness or injury or the illness or injury of a member of employee's immediate family.

Guidelines

Duration of Leave - Discretionary use of state personal leave **shall not exceed 3 consecutive days**. The **maximum** number of absences for discretionary purposes shall be **5 per semester** and **10 per school year**.

Limitations - Leave requests for days, including but not limited to staff development days, days before and after school holidays, days for state-mandated assessment tests and during the first and last week of each semester, will not be approved unless there are extenuating circumstances.

I verify that I have reviewed policy DEC (Local) and understand the definition of and purpose for using discretionary leave, that I am limited to 5 discretionary leave days per semester and that I may not use more than 3 discretionary leave days consecutively. My request is not for personal illness or injury or the illness or injury of a member of my immediate family.

Employee's Signature

Date

Supervisor Use Only

The approved Aesop Absence Report must be copied to the reverse side of or attached to this form and submitted to the payroll department when the leave is taken.

- Request Granted - I verify that this employee meets eligibility guidelines outlined above and grant the request for the use of discretionary personal leave
- Request Denied for the following reason(s):
- Has already used 5 discretionary days this semester
 - Request not submitted according to guidelines
 - Request does not meet guidelines
 - Other _____

Supervisor

Date

Superintendent

Date