

OAK GROVE SCHOOL DISTRICT
VACATION OR LEAVE REQUEST FORM
 (Other Than Personal Sick Leave)

Leave Requests must be consistent with District Policy and the appropriate employee bargaining unit agreement Articles as listed below.

- ÇSEA Article 11 (Vacations) or Article 12 (Leaves)
- AFSCME Article 9 (Vacations) or Article 10 (Leaves)
- OGEA Article 8 (Leaves)

It is the responsibility of the employee to verify availability of sick leave or vacation if applicable.

Name _____ (Please print or type) _____ (Signature)

Position _____

School/Site _____

This leave request is subject to Section _____ of the OGEA (Article 8),
 CSEA (Article 11 or Article 12), AFSCME (Article 9 or Article 10) collective bargaining agreement.

I hereby request a leave of absence beginning _____ and ending _____
 for the following purpose:

PAID LEAVE

(Requires Supervisor approval only)

- Vacation
- Personal Necessity
- ___ Death/Illness ___ Paternity
- ___ Accident ___ Court/Legal
- ___ Marriage ___ Graduation
- Matters of Compelling Personal Importance
- Other: _____

UNPAID LEAVE

(Requires Supervisor and Human Resources approval)

- Family Care Hardship
- Educational Child Rearing
- Other: _____

PAID LEAVE

Administrator/Supervisor Approved Not approved

Signature _____ School/Site _____ Date _____

UNPAID LEAVE

Administrator/Supervisor Approved Not Approved

Signature _____ School/Site _____ Date _____

Human Resources Recommendation Approved Not Approved

Signature _____ Date _____

Distribution: *White* - Attach to Absence Report; *Canary* - Human Resources; *Pink* - Employee; *Goldenrod* - Supervisor for paid leaves.
Unpaid leaves, submit entire form to Human Resources.