



# DONNA INDEPENDENT SCHOOLDISTRICT

## Request for Personal Leave

Name (Official Name): \_\_\_\_\_

Employee ID: \_\_\_\_\_ Position: \_\_\_\_\_

Campus/Department: \_\_\_\_\_ Total Days Being Requested: \_\_\_\_\_

Dates Being Requested: \_\_\_\_\_

Reason for Request:

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

**APPROVED**       **DENIED** (At the Campus/Department Level)

Signature of Immediate Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

***For Office Use Only!***

Signature of HR Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

**APPROVED**       **DENIED**

Signature of Deputy Superintendent: \_\_\_\_\_ Date: \_\_\_\_\_

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### ***Donna ISD Board Policy DEC (Local)***

**Limitations:** In order to preserve the continuity of the instructional program, the District calls attention to the importance of attendance of campus-based (if applicable) and instructionally related personnel on the days listed below. The use of discretionary days by any employee in a manner that negatively impacts the students or mission of the District may be addressed through the District's disciplinary procedures:

1. On the first five or last five teaching days of each school year;
2. On the day before or after an extended break consisting of three or more consecutive days (excluding weekends);
3. On days scheduled for end of semester or end-of-year exams;
4. The week prior to state-mandated assessments;
5. The week during state-mandated assessments; and
6. On assigned professional or staff development days.

**Duration of Leave:** Discretionary use of state personal leave **shall not exceed three consecutive workdays.**