



Columbia Heights Public Schools
1440 49th Ave NE
Columbia Heights, MN 55421

**Application For Leave – Non-Licensed Staff
(Pre-Approval)**

Name: _____ Date of Request: ____ / ____ / ____

Building: _____

Type of leave requested: Personal
 Vacation
 Staff Development (specify activity) _____
 Other (specify) _____

* Date(s) of leave: _____

It is the staff member's responsibility to notify Kelly Services to request a substitute upon approval of this request, if necessary.

Approved
Denied

Director/Supervisor

____ / ____ / ____
Date