

Calhoun County Schools  
**LEAVE REQUEST FORM**

Superintendent  
 Calhoun County Schools  
 P.O. Box 2084  
 Anniston, AL 36202

☐ ] Certificated

☐ ] Support

**NAME** \_\_\_\_\_ **EMPLOYEE#** \_\_\_\_\_

I am requesting leave for the following day(s) with a **complete explanation** listed below:

Type of Leave Requested		DATE(S)
Sick Leave		
Personal Leave		
Extra Personal Leave *		
Legal Absence - Subpoena		
Legal Absence - Jury Duty		
School Paid **		
Other **		
<b>Military Leave **</b>		
<b>Leave Without Pay **</b>		

**Leave Requests in bold need to be approved by Central Office.**

\* CERTIFIED PERSONNEL WILL BE DOCKED A CERTIFIED SUB RATE. ALL OTHERS WILL BE DOCKED AT NON-CERTIFIED SUB RATE.

\*\* Explanation of Absence: \_\_\_\_\_

**Principals, Assistant Principals and 12 Month Employees**

Annual Leave	
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<b>Person Requesting Leave</b>	<b>Date</b>	<b>School</b>
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Principal/Immediate Supervisor:

<input type="checkbox"/> ] Approve	_____	
<input type="checkbox"/> ] Disapprove	Signature	Date

Superintendent:

<input type="checkbox"/> ] Approve	_____	
<input type="checkbox"/> ] Disapprove	Signature	Date