



BEA NOTIFICATION FOR 3-DAY PERSONAL BUSINESS LEAVE

Today's Date:

| |
|----------------|
| Name: |
| Dept. or Bldg: |
| Position: |

My LEAVE is from: _____ **to:** _____

3-Day Personal Business Criteria required in Article 9.C.1, check all that apply ...

This is a Personal Business leave

This is the first time I used this leave during the current school year

These dates are not during the first five days of the school year or during the last five days of each semester

These dates do not fall on the day before or the day after a holiday or break identified in the school calendar

These dates are not during any testing dates and other critical school function days

Employee's Signature

Supervisor's Signature

Acknowledgment ONLY, if all 5 of the criteria are met

FOR HUMAN RESOURCES USE (only required if one day or more is restricted contractually):

- Approved
- Not Approved

HR Comments: _____

Assistant Superintendent of HR - Signature

Date

cc: Supervisor / Payroll / Benefits / Personnel File

* If Personal Days are utilized in 2 consecutive day increments or less and do not include a day that is restricted under the BEA contract, no approval or request form is required.