Robertson County Schools Leave Request Form

Name: _____ **Date:** _____

School: _____

Type of Leave: **Personal** **Sick** **Vacation** **Professional** **Without Pay**

Dates(s) of Leave: _____

Employee Signature: _____

Supervisor Signature: _____

Director's Approval: _____**(if necessary)**

SICK LEAVE	
9-month employees	Earn 7 days. 4 in August & 3 in January
10-month employees (teachers)	Earn 8 days. 4 in August & 4 in January
11-month employees (220 days)	Earn 9 days. 5 in August & 4 in January
12-month employees (240+ days)	Earn 10 days. 5 in August & 5 in January

PERSONAL LEAVE	
Employees with less than 10 years of Robertson County Experience	Earn 4 days. 2 in August & 2 in January
Employees with 10, but fewer than 15 years of Robertson County Experience	Earn 5 days. 3 in August & 2 in January
Employees with 15 or more years of Robertson County Experience	Earn 6 days. 4 in August & 2 in January

Personal leave may be taken at the discretion of the employee, who shall notify their administrator or supervisor at least three (3) days in advance, in writing, except in case of emergency. These days must be taken in whole day increments.

For certified staff: Building administrators may optionally approve leave when as much as 10% of the teachers at the school are absent.

The following requests require approval from the Director of Schools' Office:
During exams or state testing periods, immediately before or after a school holiday / vacation day, for scheduled professional development / in-service training days, for parent-teacher conference days.