**Nyack Union Free School District**
**13A Dickinson Avenue**
**Nyack, New York 10960**

# NTA

## PERSONAL DAY FORM

All professional staff will be allowed four (4) personal days which will be deducted from cumulative sick leave. Five days notice must be given before the requested date. If five days notice is not possible because of an emergency situation the form must be submitted on the date on which the employee returns.

**These personal days will not be used for recreation, shopping, etc.**

**This form must be completed and submitted to the Superintendent of Schools along with a an explanation for the request if the personal day(s) meet the following criteria:**

**Consecutive Days**
**Immediately Before or Immediately After a Vacation or Holiday**
**Superintendent's Conference Day**

Additional days may be granted at the discretion of the Superintendent of Schools. However, the staff member must make the request for additional days in writing.

DATE(S) OF ABSENCE: _____

NAME:_____

POSITION:_____BUILDING:_____

**REASON**: (**Attach a separate sheet if necessary)**

_____

_____

_____

_____

**Employees must report all *personal days* in WinCapWeb and on Absence Management (AESOP)**

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Your Request is: Approved: ___ Disapproved: ____ Approved without Pay: ___

Reason:_____

_____

_____

**Superintendent or Designee's Signature:_____Date: _____**