

REQUEST FOR LEAVE FOR ED. TECHS.
LEWISTON SCHOOL DEPARTMENT

I request the following leave:

- | | | |
|--|---|--|
| _____ Jury Duty (Art. XIV, A) | _____ Personal Leave
(Art. XIV, D)
(Specify Reason Below) | _____ Illness in the Immediate Family
(Art. XIV, C)
(Who: _____) |
| _____ Bereavement Leave
(Art. XIV, B)
(Who: _____) | _____ Other Leave (Professional)
(Art. XIV, E) | |

**LEAVE DATE(S)
REQUESTED:**

ANS. SERVICE 782-2897 LOCAL CALLS

Print Name: _____ School: _____

Signature: _____ Today's Date: _____

Requesting a Sub? _____ Yes _____ No Please indicate preference of sub if any.
NAME OF SUB: _____
PLEASE CALL THE ANSWERING SERVICE AS SOON AS YOU RECEIVE APPROVAL FOR YOUR
REQUEST FROM SO THAT WE MAY SECURE A SUB.

REASON FOR REQUEST:

Principal's Action: Funding Source for Professional Leave Request
_____ Denied Reason: _____

_____ Approved Signature: _____ Date: _____
(Principal)

Superintendent's Action:
_____ Denied Reason: _____

_____ Approved Signature: _____ Date: _____
(Director of Human Resources)

Signature: _____ Date: _____
(Secretary-LMB)

Notification to Teacher/Principal (Copy) Payroll Department Notification _____

REQUEST FOR LEAVE FOR GENERAL GOVERNMENT.
LEWISTON SCHOOL DEPARTMENT

I request the following leave:

- | | | |
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| _____ Jury Duty (Art. XIV, A) | _____ Personal Leave
(Art. XIV, D)
(Specify Reason Below) | _____ Illness in the Immediate Family
(Art. XIV, C)
(Who: _____) |
| _____ Bereavement Leave
(Art. XIV, B)
(Who: _____) | _____ Other Leave (Professional)
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LEAVE DATE(S)
REQUESTED:

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_____ Approved Signature: _____ Date: _____
(Principal)

Superintendent's Action:

_____ Denied Reason: _____

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(Director of Human Resources)

Signature: _____ Date: _____
(Secretary-LMB)

Notification to Teacher/Principal (Copy) Payroll Department Notification _____