



2019-2020 FACULTY STAFF ABSENCE PERMISSION FORM

Name		Date of Request	
Date(s) of Absence <i>see note below</i>		All Day?	Time Out / Time Return
		Yes / No	/
		Yes / No	/
Do you need a substitute teacher?	Periods (circle all that apply):	Other duties:	
Yes / No	0 1 2 3 4 5 6 7		

SCHOOL RELATED

- Conference or workshop (attach APPROVED PreTravel/Training Authorization form)
- Field trip with students (Pre-approved by Dean of Students PRIOR to event date)
- CCHS athletic contest
- Retreat or SEARCH

NON-SCHOOL RELATED

- Personal leave (2 per year) 1st PL Date _____ 2nd PL Date _____
- Family emergency (sick time)
- Doctor's appointment or scheduled absence (sick time)
- Funeral (bereavement leave)

FULL-TIME YEAR ROUND STAFF ONLY

- Vacation

NOTE: Please avoid the following dates:

- In-Service – August 20-23
- SENIOR DAY RETREAT– September 27
- Teacher In-Service – October 11
- National Testing Day/Freshman Day Retreat – October 16
- Digital Learning Day – November 27
- SEARCH RETREAT DATES: Dec. 5-6, Jan. 30-31, Apr. 16-17
- Teacher In-Service – January 21
- In School Diversity Conference – January 29
- SOPHOMORE RETREAT – February 18
- In-Service – June 8 - 9

SUPERVISOR'S APPROVAL _____

PRINCIPAL'S APPROVAL _____

FOR OFFICE USE ONLY: DATE: _____	SIGNED ORIGINAL ON FILE <input type="checkbox"/>	COPY EMAILED TO STAFF <input type="checkbox"/>
# OF PERSONAL LEAVE DAYS USED _____	# OF SICK DAYS USED _____	PAID # OF DAYS _____ UNPAID # OF DAYS _____