



2018-2019 FACULTY STAFF ABSENCE PERMISSION FORM

Name		Date of Request
Date(s) of Absence <i>see note below</i>		All Day?
	Yes / No	Time Out / Time Return
	Yes / No	/
Notes/Other Duties		

SCHOOL RELATED

- Conference or workshop (please attach a copy of the brochure/flyer)
- Field trip with students
- CCHS athletic contest
- Retreat or SEARCH

NON-SCHOOL RELATED

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

FULL-TIME YEAR ROUND STAFF ONLY

- Vacation

NOTE: Please avoid the following dates:

- In-Service – August 20 & 21
- SENIOR DAY RETREAT– September 21
- National Testing Day – October 10
- Friday, October 12 (Accreditation/Teacher In-Service)
- Monday, November 26 (Digital Learning Day/Teacher In-Service)
- SEARCH RETREAT DATES: Dec. 6-7, Jan. 31- Feb. 1, Apr. 11-12
- In-Service – January 18
- SOPHOMORE RETREAT – February 19
- In-Service – June 10 - 11

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 _____	