BERRIEN SPRINGS PUBLIC SCHOOLS LEAVE REQUEST

Directions:

Employee completes Section I. The form is then submitted to your supervisor.

SECTION I	
Date of Notice:	Building
Employee Name:	Position:
Date(s) Requested:	
TYPE OF LEAVE REQUESTED	
Vacation Sick Day Comp Time	Non Duty Day Personal Day *Funeral Leave
Reason for Request (be specific):	
Employee Signature	-
ACTION BY SUPERVISOR/CENTRAL OFFICE	
	Date Received by Supervisor:
Supervisor:	Signature of Supervisor:
Approved Denied Paid Unpaid	
Central Office:	Date Received by Central Office:
ApprovedDenied	Signature Central Office:
Absence in Red Rover:	Added to Skyward:

^{*}must list relation to individual so that payroll know if this day is chargable