

Gratton School District
Employee Request for Leave of Absence
OR
Notification of Absence

Name: _____ Date: _____

Requested Dates of Absence: Starting _____, 20____

Ending _____, 20____

Reason for Request: _____

Circle One

Used Sub-Finders

Pre-Arranged

Name: _____

I request paid / unpaid (circle one) leave for the time period and reasons stated above.

Signature: _____

District Use Only: Approved _____ Disapproved _____

Reasons: _____

Date: _____ Signature: _____