

KEOTA COMMUNITY SCHOOL DISTRICT

Employee Leave Request

Employee _____

(please press firmly)

Requesting Leave for:

_____ M T W TH F
Month Day (s) Year AM/PM AM/PM AM/PM AM/PM AM/PM

Reason for this leave request: _____

Today's Date

Employee's Signature

The Following to be completed by an administrator.

- Leave Approved
- Leave Not Approved

Leave Type and Number of Days:

- _____ Sick Leave
- _____ Personal Leave
- _____ Family Sick Leave
- _____ Field Trip
- _____ Athletic Trip/Meeting
- _____ Administrative Request
- _____ Jury/Legal Leave
- _____ Bereavement Leave
- _____ Association Leave
- _____ Vacation
- _____ General Leave
- _____ Extended Sick Leave w/out Pay
- _____ Unpaid Leave
- _____ Other _____

Comments: _____

Administrator's Signature

Date

Substitute's Signature

Date

White: Administrator

Yellow: Payroll

Pink: Substitute

Gold: Employee