

**MARION COUNTY SCHOOLS
PERSONAL LEAVE REQUEST FORM**

Personnel _____ Date _____
School/Department _____ Classification _____
Principal/Supervisor _____ Time _____

Number personal Leave Days as of July 1	_____	Personal Leave Requests For Following Day(s)	_____
Number Personal Leave Days Used Prior To This Request	_____		_____
Number Personal Leave Days This Request	_____		_____
Number Personal Leave Days Remaining	_____		_____

I hereby request approval to be absent for the date(s) listed above for personal leave and am entitled under Board of Education regulations for personal leave and am entitled under Board of Education regulations for reimbursement for such leave.

Signature of Personnel _____

APPROVAL OF REQUEST

Approved By _____
(Signature of Principal/Supervisor)

Date: _____

Time: _____

NOTE: See Reverse side for rules and regulations.

White Copy - Assistant Supervisor

Canary Copy - Principal/Supervisor

Pink Copy - Personnel