

**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