

SCHOOL DISTRICT #64 (Gulf Islands)

LEAVE OF ABSENCE APPLICATION
 Please report all absences from appointments to
 Central Dispatch at the SBO.

FERNWOOD
 2017-2018

Date received at SBO:

NAME of Employee _____

Work Location _____ Position _____

First Day: _____ Last Day: _____

Date(s) of Absence _____

Reason for Absence _____

Employee Signature _____ Date _____

P/VP/Supervisor signature _____ Date _____

Office Use Only

7

Location No.

No. of days

Reason Code

Approval No.

No of Days

PR

AR

Paid by: Board Other: _____

Pro D or Pro G Authorization Signature _____

Replacement #1 (name) _____

Replacement #2 (name) _____

EA - IEP REPLACEMENT _____

TIC (for PVP) _____

Account: FPG OBJECT CC

PR Authorized Signature _____ Date _____

CDS: _____ Initials & Date: _____

Specify EXACT time(s) of Absence:

TEACHER	FTE:	
8:25am - 3:20pm	1.19 <input type="checkbox"/>	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>
8:25am - 11:30am AM	0.60 <input type="checkbox"/>	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>
12:15pm - 3:20pm PM	0.59 <input type="checkbox"/>	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>

OR

OTHER TIMES AND ALL CUPE STAFF:

Start time	End time	FTE/hrs	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>
Start time	End time	FTE/hrs	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>
Start time	End time	FTE/hrs	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>

Sub required: Yes No



Specify EXACT time(s) of Replacement:

TEACHER	FTE:	
8:25am - 3:20pm	1.19 <input type="checkbox"/>	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>
8:25am - 11:30am AM	0.60 <input type="checkbox"/>	MO <input type="checkbox"/> TU <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/>
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