

SCHOOL DISTRICT No.64 (Gulf Islands)

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

FERNWOOD
2018-2019

Date received at SBO:

NAME of Employee		<u>Office Use Only</u> 7 Location No. No. of days Reason Code Approval No. No of Days PR AR	
Work Location	Position		
First Day:	Last Day:		
Date(s) of Absence			
Collective Agreement Article # & Description			
Employee Signature	Date		
P/VP/Supervisor signature	Date		
Paid by: Board <input type="checkbox"/> Other: _____ _____ Pro G# ProD Authorization Signature			
Replacement #1 (name) for Teacher and Office Use			
Replacement #2 (name) for Teacher and Office Use			
EA - IEP REPLACEMENT _____ <input type="checkbox"/> 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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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"/>
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