

Trenton Board of Education Absence Request Form

Please complete this form to indicate the leave that you are requesting and submit to your immediate supervisor (i.e. building principal, director, etc.)

Name _____ *Date* _____

Location _____ *Position* _____

Day/s of absence _____

Check the reason for your absence: (Use only letter code) _____

A = PERSONAL ILLNESS C = FAMILY ILLNESS D = DEATH IN IMMEDIATE FAMILY E = DEATH OF OTHERS F = SUBPOENA BY COURT * H = MILITARY LEAVE* I = IN-SERVICE*	I = IN-SERVICE* J = JURY DUTY* N = PERSONAL BUSINESS T = COMP DAY U = UNION* V = VACATION Z = NOT PAID/PERSONAL
<i>* Additional documentation required by Human Resources</i>	



Employee Signature _____ *Date* _____

Supervisor's Signature _____ *Date* _____

Note: * Supervisor's signature needed for permission to take leave