EARLY LEAVE NOTIFICATION

GOLDEN PLAINS U.S.D. NO. 316

(Certified Staff only)

NAME: _____ DATE SUBMITTED: _____

DATES LEFT EARLY: _____ TIME DEPARTED: _____

EMPLOYEE'S REQUEST

For the following SCHOOL RELATED activity, I request to LEAVE EARLY (after 2:30 PM).

☐ SCHOOL ACTIVITY: _____

Personnel should refer to the negotiated agreement, certified staff handbook, or individual contract for definitions of the various leaves available. Some leaves require a statement of reason(s) for the leave. Please state the specific reason(s) if required.

_____

_____

_____

Will a substitute be required? ☐ Yes ☐ No

If yes, who do you suggest? 1._____
2._____

_____
Signature

ADMINISTRATIVE ACTION

Superintendent's Action
☐ Approved as requested
☐ Approved with exceptions as noted
☐ Not Approved for the following reason(s):

_____

Superintendent's Signature: _____

August 17