

PROFESSIONAL LEAVE REQUEST

As per the policy of the board of education, certificated personnel may be granted leave to attend certain professional meetings. All professional leave must be approved in advance and in strict adherence to the policy.

Date Request Made _____

_____ requests authorization for _____ days professional leave to attend _____

(number)

_____ scheduled for _____ at _____

(meeting)

(dates)

(location of meeting)

The program for the meeting (is, is not) directly related to my assignment area. (Please attach a copy of the program, if available.) I will be prepared to give or write a report for the benefit of those interested.

Signed _____
(Name)

AUTHORIZATION

Approval _____; Disapproval _____

Comments: _____

Signed _____
(Principal)

Approval _____; Disapproval _____

Comments: _____

Signed _____
(Superintendent)