

TRANSPORTATION LEAVE / EXCEPTION FORM

Unplanned sick leave and Time Keeper exceptions must be submitted by 9:30AM the next school day.

Name: Parking School:		(Timekeeper Number)		
				vill depend on the availability of substivithin 2 working days of the request. Ar Planner. Unplanned sick leave exceptions
Гуре of leave requested: □Jury	duty	nual Leave	☐ Leave Without Pay	
Benefits and Employment Policy Manua a. Personal illno b. Care after ac c. Medical App d. Illness in the attendance e. Death in the	l): ess or injury which prevents loption of a child ointment immediate family/ medical immediate family	s you from performi appointments relate	ng your usual duties ed to the illness that necessitates your com a medical doctor or other acceptable	
adoption when sick leave is	s used. Immediate family inc	ludes spouse, childre	ppointment, illness or death in the family, or en, parents, brothers, sisters, grandparents, ep, half, and in-law relationships.	
Other information you want to share	re:			
Date(s) Requested:				
request the following: Mon				
Γime of day: □Full Day	□Half day AM # of l □Half day PM # of h	nours	Mid-day AM # of hours	
Leave time can only be reque	ested in whole days a	nd hours, pleas	e note the hours needed above	
☐ Time Keeper Exception: Must be co	ompleted and submitted by	9:30AM the next sci	hool day	
Date(s):	Time worked:			
Reason for exception:				
hereby certify that this report of tin appropriate use of leave policies.	ne exception and/or leave	request is correct j	for the period covered and adheres to the	
Employee's Signature:		Today's Date:		
Acknowledged/Received By:		Date: _		
Entered By:		Date	Date:	