



# Certificated Absence Report

Employee Name \_\_\_\_\_ School Site/Location: \_\_\_\_\_ Grade: \_\_\_\_\_

Date(s) Absent \_\_\_\_\_ Full Day \_\_\_\_\_ Half Day \_\_\_\_\_ ( AM / PM )  
Circle Appropriate

**\*\* This information is to be completed and sent to the Payroll Department upon returning from the absence or once prior approval is granted\*\***

**I was absent due to the following:** (You must select one and complete the following information below)

\_\_\_\_\_ **Personal Necessity (9b & 9d)** (You must select one of the two choices below)

\_\_\_\_\_ **For reasons listed in the RTA contract, Article IX, section 9b. 10 Days of sick leave may be used for this leave.**  
Approval must be obtained at least 2 weeks in advance except in those areas addressed in Section "C".

\_\_\_\_\_ **For day specified in the RTA contract, Article IX, Section 9d. DISCRETIONARY DAYS are limited to 5 only.**  
(These limitations shall apply to leave taken under subsection "C" & "D". 48 hour notice is required except in cases of emergency.)

\_\_\_\_\_ **Sick Leave** (RTA contract, Article IX, Illness in excess of 3 days will require physician's written verification.)

\_\_\_\_\_ **Workers Compensation Leave/Industrial Accident** (RTA Contract Article XII) **Date of Injury:** \_\_\_\_\_

\_\_\_\_\_ **Jury Duty** (Attach Proof of Service)

\_\_\_\_\_ **Bereavement** (RTA contract, Article XII) – **Immediate family member:** \_\_\_\_\_  
(Example: Mother, Father, etc.)

\_\_\_\_\_ **Union Release**

**\*PRIOR APPROVAL NEEDED FOR:**

\_\_\_\_\_ **PERSONAL NECESSITY (9B) – Date (s)** \_\_\_\_\_

**Leave: Granted:** \_\_\_\_\_ **Denied** \_\_\_\_\_

\_\_\_\_\_  
**Site Administrator**

\_\_\_\_\_  
**Date**

.....  
**I certify the above information is true and can be verified. I verify under penalty of perjury that the personal necessity leave I have requested/used is not being used merely for an extension of a holiday or vacation, or purely for personal convenience as stipulated under Article IX section 9a.**

\_\_\_\_\_  
**Teacher Signature**

\_\_\_\_\_  
**Date**