VACATION / PERSONAL DAY REQUEST FORM

Name: _______________________________ E#: _____________ Date: ______

I request the following ☐ vacation day(s) ☐ personal day(s):
(Indicate number of hours per day if not taken as full day)

____________________________________________________________________

Please do not request vacation when school is in session unless it cannot be avoided. August and early September are especially important times to have all staff present.

Supervisor’s Approval: ___________________________ Date: __________

Please submit form to Emil Cheng at Admin. 212 in advance of time requested.

____________________________________________________________________

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