

School Location/Job Titl	e				
Name of Employee Leave Codes:		Social Secu	rity # Complete SSN :		
SL=Sick Leave ( <u>Identi</u> PL=Personal Leave		AW=Absent without Pages BL=Bereavement Leave			
AL=Annual Leave			ge) <u>Explain in "Commen</u>	<u>its"</u>	
If you are out of sick or p sick leave, mark below: ' Taken For and Relations	'Sick Leave Taken For				
Reporting Dates		07/01/2013-07/26/2013			
Monday	Tuesday	Wednesday	Thursday	Friday	
1	2	3	4	5	
8	9	10	11	12	
15	16	17	10	10	
15	16	17	18	19	
22	23	24	25	26	
Please put substitute na		elow sub's name (2nd),	and the amont of time	taken (3rd) in the	
correct day on the calend Sick Leave Taken For:		Comments:			
Myself					
Spouse Children	_				
Parents					
Grandparents	_				
Grandchildren	<del>-</del>				
Brother Sister		L cortify those	e statements to be true and co	arroot	
Mother-in-law		r certify these	e statements to be true and o	oneci.	
Father-in-law					
Daughter-in-law	_		Employee's Signature		
Son-in-law Brother-in-law					
Sister-in-law	_		Approval Signature		
D		-	D.1.0. 11.4 = 1		
Bereavement Leave Take	en For:		Relationship to Employ	ee:	

Identify individual (per article VI, Section B, Item 6 of Negotiated Contract)

Please turn in to your school office before the last Friday of each month to be submitted to the Payroll Dept.

School Location/Job Title	e					
Name of Employee Leave Codes:		Social Sec	urity # Complete SSN			
SL=Sick Leave (Identification PL=Personal Leave AL=Annual Leave	В	AW=Absent without Pay BL=Bereavement Leave ( <u>Identify below</u> ) OT=Other (do not charge) <u>Explain in "Comments"</u>				
If you are out of sick or p sick leave, mark below: " Taken For and Relations!	"Sick Leave Taken For	·	<del>-</del>			
Reporting Dates		07/29/2013-0	08/30/2013			
Monday	Tuesday	Wednesday	Thursday	Friday		
29	30	31	1	2		
5	6	7	8	9		
12	13	14	15	16		
19	20	21	22	23		
26	27	20	20	20		
Please put substitute nar	me (1st), leave code be	elow sub's name (2nd)		ne taken (3rd) in the		
correct day on the calend	dar.	Comments:	<u>, and and and</u>	io tanon joi		
Myself	-	Ollillenis.				
Spouse Children						
ParentsGrandparents Grandshildren	<del>_</del>					
GrandchildrenBrother	<del>_</del>					
SisterMother-in-law		i ceruiy unesc	e statements to be true and	correct.		
Father-in-lawDaughter-in-law	_		Employee's Signatur	e		
Son-in-lawBrother-in-law	_		Americal Cianature			
Sister-in-law			Approval Signature			
Bereavement Leave Take	en For:	F	Relationship to Employ	 vee:		

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School Location/Job Title _					
Name of Employee		Social Secur	rity #	4	
Leave Codes:  SL=Sick Leave ( <u>Identify</u> ) PL=Personal Leave AL=Annual Leave		Complete SSN #  AW=Absent without Pay BL=Bereavement Leave ( <u>Identify below</u> ) OT=Other (do not charge) <u>Explain in "Comments"</u>			
If you are out of sick or pers leave, mark below: "Sick Lea and Relationship."		and report the leave as	s AW. Explain under com	ments. If it is for sick	
Reporting Dates		09/02/2013	-09/27/2013		
Monday	Tuesday	Wednesday	Thursday	Friday	
	2	4	5		
	3	4			
9	10	11	12	13	
16	17	18	19	20	
23	24	25	26	27	
Please put substitute name		elow sub's name (2nd),	and the amont of time ta	ken (3rd) in the	
correct day on the calendar. Sick Leave Taken For:Myself		Comments:			
Spouse Children Parents					
Grandparents Grandchildren					
BrotherSisterMother-in-law Father-in-law		I certify the	se statements to be true and c	orrect.	
Daughter-in-law Son-in-law			Employee's Signature		
Brother-in-law Sister-in-law			Approval Signature		
Bereavement Leave Taken F	or:		Relationship to Employe	ee:	

Bereavement Leave Taken For:

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Revised: 8/2013

School Location/Job Titl	e			
Name of Employee Social Security #				
Leave Codes:  SL=Sick Leave (Identify) PL=Personal Leave BL=Bereavement Leave (Identify below) AL=Annual Leave OT=Other (do not charge) Explain in "Comments"  If you are out of sick or personal days, request and report the leave as AW. Explain under comments. If it is for				
If you are out of sick or p sick leave, mark below: ' Taken For and Relations	'Sick Leave Taken Fo			
Reporting Dates		10/25/2013		
Monday	Tuesday	Wednesday	Thursday	Friday
30	1	2	3	
7	8	9	10	
14	15	16	17	
21	22	23	24	
Places put substitute per	ma (1at) lagya sada b	alow sub's name (2nd)	and the amont of time to	okan (2rd) in tha
Please put substitute nat correct day on the calend		elow sub s flame (zmu),	and the amont of time to	aken (Sru) in the
Sick Leave Taken For:		Comments:		
Myself Spouse				
Opodac Children	-			
Parents	<u>-</u>			
Grandparents				
Grandchildren Brother	-			
Sister		I certify these	e statements to be true and co	rrect.
Mother-in-law		rooting thos	5 StateSinte to be true und of	
Father-in-law	<u>-</u>			
Daughter-in-law			Employee's Signature	
Son-in-law Brother-in-law				
Sister-in-law	-		Approval Signature	
Bereavement Leave Take	en For:	-	Relationship to Employe	e:
- Si Satolilolit Louve Take	··· 1 <b>·</b> · ·		to Employe	· · ·

Identify individual (per article VI, Section B, Item 6 of Negotiated Contract)

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School Location/Job Title	9			<del> </del>
Name of Employee Social Security #				
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	Sick Leave Taken Fo	st and report the leave as or". If for bereavement lea		
Reporting Dates 10/28/2013-11/29/2013				
Monday	Tuesday	Wednesday	Thursday	Friday
28	29	30	31	
4		5 6	7	
11	12	13	14	
18	19	20	21	
25	26	•	28	
Please put substitute nar correct day on the calend		below sub's name (2nd), a	and the amont of time ta	iken (3rd) in the
Sick Leave Taken For:	<u></u>	Comments:		
Myself				
Spouse				
Children Parents				
Grandparents				
Grandchildren				
Brother				
Sister		I certify these	statements to be true and cor	rect.
 Mother-in-law		1 contry those	Julianiania to bo trao aria our	
Father-in-law				
Daughter-in-law			<b>Employee's Signature</b>	
Son-in-law				
Brother-in-law				
Sister-in-law			Approval Signature	
Bereavement Leave Take	n For:		elationship to Employe	e:

Identify individual (per article VI, Section B, Item 6 of Negotiated Contract)

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School Location/Job Title	e				
Name of Employee		Social Secu	ırity #		
Leave Codes:		Complete SSN #			
SL=Sick Leave ( <u>Identi</u> PL=Personal Leave		\W=Absent without Pa BL=Bereavement Leave			
AL=Annual Leave			ge) <u>Explain in "Commen</u>	<u>ts"</u>	
If you are out of sick or p sick leave, mark below: ' Taken For and Relations	'Sick Leave Taken For'		_		
Reporting Dates		12/02/2013-	12/27/2013		
Monday	Tuesday	Wednesday	Thursday	Friday	
2	3	4	5		
9	10	11	12	1	
16	17	18	19	2	
20		0.5	22		
23	24	25	26	2	
Please put substitute nai	me (1st). leave code be	low sub's name (2nd).	. and the amont of time t	aken (3rd) in the	
correct day on the calend	dar.			· · · · · · · · · · · · · · · · · · ·	
Sick Leave Taken For:	C	Comments:			
Myself Spouse					
Children	_				
Parents					
Grandparents					
Grandchildren Brother	_				
Brotner Sister		I certify thes	e statements to be true and co	orrect	
 Mother-in-law		r certify tries	e statements to be true and et	orreot.	
Father-in-law					
 Daughter-in-law	Paughter-in-law Employee's Signature				
Son-in-law			-		
Brother-in-law	_		Ammount		
Sister-in-law			Approval Signature		
		-			
<b>Bereavement Leave Take</b>	en For:		Relationship to Employe	ee:	

Identify individual (per article VI, Section B, Item 6 of Negotiated Contract)

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School Location/Job Title				
Name of Employee Leave Codes:		Social Secu	urity #	<del></del>
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If you are out of sick or per sick leave, mark below: "Si Taken For and Relationship	ick Leave Taken For		<del>-</del>	
Reporting Dates		12/30/2013-	-01/31/2014	
Monday	Tuesday	Wednesday	Thursday	Friday
30	31	1	2	
0		8	9	1
13	14	15	16	1
20	21	22	23	2
27	28	29	30	3
Please put substitute name correct day on the calenda		elow sub's name (2nd)	, and the amont of time	taken (3rd) in the
Sick Leave Taken For:		Comments:		
Myself Spouse				
Children	<del>-</del>			
Parents	_			
Grandparents Grandchildren				
Brother	_			
Sister		I certify thes	se statements to be true and	correct.
Mother-in-law Father-in-law				
Daughter-in-law	_		Employee's Signatur	е
Son-in-law Brother-in-law				
Sister-in-law	_		Approval Signature	
Bereavement Leave Taken	For:		Relationship to Employ	/ee:

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SL=Sick Leave ( <u>Identi</u> PL=Personal Leave AL=Annual Leave		AW=Absent without Pa BL=Bereavement Leave OT=Other (do not charç	y e ( <u>Identify below</u> )	
If you are out of sick or p sick leave, mark below: " Taken For and Relations	'Sick Leave Taken For			
Reporting Dates		02/03/2014-	02/28/2014	
Monday	Tuesday	Wednesday	Thursday	Friday
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
Please put substitute nar correct day on the calend Sick Leave Taken For:	dar.	elow sub's name (2nd), Comments:	and the amont of time	taken (3rd) in the
Myself Spouse Children Parents	-			
Grandparents Grandchildren Brother	-			,
SisterMother-in-lawFather-in-lawDaughter-in-law	-	I certify thes	e statements to be true and o	
Son-in-law Brother-in-law Sister-in-law	-		Approval Signature	
Bereavement Leave Take	en For:	-	Relationship to Employ	/ee:

Identify individual (per article VI, Section B, Item 6 of Negotiated Contract)

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School Location/Job Title					
Name of Employee					
Leave Codes:		Complete SSN #			
SL=Sick Leave ( <u>Identify</u> PL=Personal Leave AL=Annual Leave	В	W=Absent without Pay L=Bereavement Leave T=Other (do not charg		nts"	
If you are out of sick or pe sick leave, mark below: "S Taken For and Relationsh	Sick Leave Taken For"		_		
Reporting Dates		03/03/2014-0	3/28/2014		
Monday	Tuesday	Wednesday	Thursday	Friday	
3	4	5	6		
10	11	12	13	1.	
17	18	19	20	2	
24	25	26	27	2	
Please put substitute nam	ne (1st), leave code be	low sub's name (2nd).	and the amont of time	taken (3rd) in the	
correct day on the calendary	ar.		<u></u>	<u> </u>	
Sick Leave Taken For:  Myself	C	omments:			
Spouse Children	_				
Parents					
Grandparents					
Grandchildren Brother	_				
Sister		I certify these	statements to be true and c	orrect.	
Mother-in-law Father-in-law					
Daughter-in-law			Employee's Signature	)	
Son-in-law Brother-in-law					
Sister-in-law	_		Approval Signature		
Bereavement Leave Taker	For	_	Polationship to Employ	00.	
Identify individual (per article VI,			Relationship to Employ	<del>сс.</del>	

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Name of Employee Leave Codes:	Name of EmployeeSocial Security #				
SL=Sick Leave ( <u>Identify</u> PL=Personal Leave AL=Annual Leave		AW=Absent without Pa BL=Bereavement Leav OT=Other (do not char		nts"	
If you are out of sick or pesick leave, mark below: "S Taken For and Relationsh	Sick Leave Taken Fo				
Reporting Dates		03/31/2014	-04/25/2014		
Monday	Tuesday	Wednesday	Thursday	Friday	
31	1	2	3	4	
7	8	9	10	11	
14	15	16	17	18	
21	22	23	24	25	
Please put substitute nam	ie (1st), leave code k	pelow sub's name (2nd)	, and the amont of time	taken (3rd) in the	
correct day on the calendary Sick Leave Taken For:	ar.	Comments:			
Myself		Comments.			
Spouse Children					
Parents Grandparents					
Grandchildren Brother					
Sister		I certify thes	se statements to be true and	correct.	
Mother-in-lawFather-in-law					
Daughter-in-law Son-in-law	<del></del>			re	
Brother-in-law Sister-in-law			Approval Signature		
oloter in law					
Bereavement Leave Taker	ı For:		Relationship to Employ	yee:	
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If you are out of sick or p sick leave, mark below: ' Taken For and Relations	'Sick Leave Taken Fo			
Reporting Dates 04/28/2014-05/23/2014				
Monday	Tuesday	Wednesday	Thursday	Friday
28	29	30	1	
5	6	7	8	
12	13	14	15	
19	20	21	22	:
Please put substitute nau correct day on the calend		elow sub's name (2nd).	, and the amont of time t	aken (3rd) in the
Sick Leave Taken For:		Comments:		
Myself				
Spouse Children	-			
Parents				
Grandparents	-			
Grandchildren				
Brother				
Sister		I certify thes	e statements to be true and co	orrect.
Mother-in-law				
Father-in-law			Employeeda Olamatari	
Daughter-in-law			Employee's Signature	
Son-in-law Brother-in-law				
Sister-in-law	-		Approval Signature	
Bereavement Leave Take	en For:	-	Relationship to Employe	<u></u>
_ 3. 3	, · •		- 13.5	· <u> </u>

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School Location/Job Title				<del></del>
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SL=Sick Leave ( <u>Identify</u> )  PL=Personal Leave  BL=Bereavement Leave ( <u>Identify below</u> )  AL=Annual Leave  OT=Other (do not charge) <u>Explain in "Comments"</u>				
If you are out of sick or pe sick leave, mark below: "S Taken For and Relationsh	Sick Leave Taken For'		_	
Reporting Dates		05/26/2014-0	6/27/2014	
Monday	Tuesday	Wednesday	Thursday	Friday
26	27	28	29	3
2	3	4	5	
-			5	
9	10	11	12	1
16	17	18	19	2
23	24	25	26	2
Please put substitute nam correct day on the calendary		low sub's name (2nd), a	nd the amont of time tak	cen (3rd) in the
Sick Leave Taken For:		comments:		
Myself Spouse	_			
ChildrenParents				
Grandparents Grandchildren				
Brother				
Sister Mother-in-law		I certify these s	statements to be true and corre	ect.
Father-in-lawDaughter-in-law	_		Employee's Signature	
Son-in-law Brother-in-law			. , .	
Sister-in-law	_		Approval Signature	
		<del></del>	·	
Bereavement Leave Taker	n For:	Re	elationship to Employee	• •

Bereavement Leave Taken For:

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