

Leave request

Form HR-004
Revised 1/3/2015



Any and all requests for leave must be properly documented and accounted using this form. Failure to report or account for an absence may be grounds for disciplinary action against the employee who incurred the absence, the responsible secretary, and/or the employee's supervisor.

Employee information

Name _____

Preferred phone _____

Preferred email _____

Employee ID

9 5 4 0 0

Leave requested

All requested leave should fall under one of the following categories. Select the category that applies to your request by checking the box next to it. Use a separate form for each category of leave, even if consecutive days of leave are to be requested. Attach documentation as needed.

SHORT-TERM LEAVE

- PERSONAL LEAVE WITH CAUSE**
MUST HAVE ACCRUED LEAVE TO USE
- PERSONAL LEAVE WITHOUT CAUSE**
MUST HAVE ACCRUED LEAVE TO USE
- VACATION DAY(S)**
261-DAY EMPLOYEES ONLY
- OUT-OF-CALENDAR DAY(S)**
240-DAY EMPLOYEES ONLY
- OS DAY(S)**
SCHOOL-BASED EMPLOYEES MUST FOLLOW SCHOOL CALENDAR
- PROFESSIONAL DEVELOPMENT**
FOR COUNTY-APPROVED MEETING OR SESSION ONLY

LONG-TERM LEAVE

- MILITARY**
- EDUCATIONAL**
- MEDICAL**
- BIRTH / ADOPTION / INFANT BONDING**
- POLITICAL**
- FAMILY**
- OTHER**

DATE LEAVE TO BEGIN

DATE LEAVE TO END

SUPERVISOR SIGNATURE

DATE

APPROVAL

(SHORT-TERM: SUPERVISOR; LONG-TERM: BOARD OF EDUCATION)

APPROVED

NOT APPROVED - REASON: _____

DATE OF BOARD ACTION
(LONG-TERM ONLY) _____

OF DAYS
(SHORT-TERM ONLY) _____

Subject to the provisions of WV Code §18A-4-10, requests for personal leave without cause may be denied if, at the time of the request, 15% of the employees who report to the requesting employee's supervisor or 3 employees, whichever is greater, have previously submitted requests and been granted personal leave without cause for the affected days.

Personal leave with cause may only be used in the following situations:

- a) Personal injury due to an accident
- b) Personal sickness
- c) Death in the immediate family (no more than 3 working days)
- d) Life threatening illness of the employee's spouse, parent, or child.

Requests for leave must be submitted no later than 24 hours prior to their effective date, except in emergency situations, when they must be submitted as soon as practical. (MCBOE policies 3431 and 4431)

Employee signature and acknowledgement

By signing here, I certify that I am the above named employee and that I submit this leave request in good faith and without reservation. I acknowledge that I have read and understand the provisions of WV Code §18A-4-10 and Mingo County Board of Education policies, as applicable. I understand that requests for short-term leave are subject to supervisor approval, and that requests for long-term leave are subject to approval by the Mingo County Board of Education at a regular or special meeting. I further understand that I may be required to provide documentation before and / or after such leave is taken to receive and / or maintain this approval.

SIGNATURE

DATE

FOR OFFICE
USE ONLY

DATE RECEIVED

SOURCE