

# Leave Request Form

<b>Last Name</b>		<b>First Name</b>		<b>MI</b>	<b>Social Security #</b>
<b>School/Department</b>		<b>Position</b>		<b>Bargaining Unit</b>	
<b>Beginning Date</b>		<b>Time</b>		<b>Ending Date</b>	
Month Day Year		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		Month Day Year	
				<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
				Total (Hours/Days)	
Sub Required <input type="checkbox"/> No <input type="checkbox"/> Yes		Substitute Name _____		Job # _____	
<b>Report All Leave in IFAS or on a Time Card - Check Type of Leave Requested Below - Indicate # of Days or Hours Above</b>					
<b>Type of Leave (check the box below that describes your leave)</b>				<b>Days</b>	<b>Hours</b>
<input type="checkbox"/> <b>Annual/Personal Leave (506)</b> <i>*ACE use (516)</i>					
<input type="checkbox"/> <b>Civic Leave (560)</b> <i>*Apply for Civic Leave electronically using MLP. Upon approval, print a copy of the MLP form, attach it to this form, and submit them to your Administrative Assistant.</i>					
<input type="checkbox"/> <b>Emergency Leave</b> <div style="text-align: right;"> <input type="checkbox"/> Sick (520) ( )  <input type="checkbox"/> Annual/Personal (506) ( )         </div> <i>*If emergency leave is to be charged to more than one category, indicate the number of days charged to each type of leave in the boxes to the left.</i>					
<input type="checkbox"/> <b>Leave Without Pay (LWOP) (10 days or less)</b> <i>* If LWOP is more than 10 days, submit completed form #103 "Request for Extended Leave of Absence" instead of this form.            * LWOP for AEA members only requires approval by the Executive Director of Human Resources if it exceeds three days.</i>					
<input type="checkbox"/> <b>Legal Leave (570)</b> <i>*Submit this original approved leave form and Certificate of Juror's Attendance to Payroll</i>					
<input type="checkbox"/> <b>Military Leave (580)</b> <i>*Submit this original approved leave form and military orders to Payroll</i>					
<input type="checkbox"/> <b>Non Work Days (530)</b>					
<input type="checkbox"/> <b>Professional Leave (595)</b> <i>*Use Form 102 or travel requisitions as applicable (see Travel Procedures) with the Leave Request when traveling out of the district boundaries.</i>					
<input type="checkbox"/> <b>Professional Leave Bank (AEA only)</b> <i>*Apply for Professional Leave electronically using MLP. Upon approval, print a copy of the MLP form, attach it to this form, and submit them to your site Administrative Assistant.</i> <div style="text-align: right;"> <input type="checkbox"/> Days received from building (590) ( )  <input type="checkbox"/> Days received from district bank (600) ( )         </div>					
<input type="checkbox"/> <b>Release Time Leave (540)</b>					
<input type="checkbox"/> <b>Sick Leave (520)</b>					
<input type="checkbox"/> <b>Student Activity Leave (535)</b>					
<input type="checkbox"/> <b>Union/Association Leave (610)</b>					
<input type="checkbox"/> <b>Workers' Comp Leave (620)</b>					
<b>Reason/Justification for the leave</b>					
<b>Address while on leave: (Include State Location)</b>					<b>Telephone # while on leave</b>
<b>Employee Signature</b>					<b>Date</b>
<b>Principal/Supervisor Signature</b>					<b>Date</b>
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved					
<b>HR Executive Director Signature if AEA member taking LWOP Pay exceeds 3 Days</b>					<b>Date</b>
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved					