

**SHORELINE SCHOOL DISTRICT NO 412  
LEAVE/ABSENCE RECORD**

SCHOOL/DEPARTMENT \_\_\_\_\_ DATE \_\_\_\_\_

EMPLOYEE NAME \_\_\_\_\_  
(PLEASE PRINT)                      LAST                                      FIRST                                      INITIAL

TYPE OF ABSENCE REQUESTED/TAKEN AND CODE

- |   |  |
|---|--|
| <input type="checkbox"/> Sick Leave (S)   | <input type="checkbox"/> Jury (J)      |
| <input type="checkbox"/> Vacation (V)     | <input type="checkbox"/> Military (M)  |
| <input type="checkbox"/> Personal (P)     | <input type="checkbox"/> Unpaid (U)    |
| <input type="checkbox"/> Bereavement (B)  | <input type="checkbox"/> Non-Work (NW) |
| <input type="checkbox"/> Professional (Z) | <input type="checkbox"/> Comp Time (C) |

Please complete the following information below for Professional Leave:

Purpose/Program \_\_\_\_\_ Date(s) \_\_\_\_\_

Budget number or contact person \_\_\_\_\_

Will Substitute be required?                      No       Yes

If yes, has Substitute request been made to Subfinder? \_\_\_\_\_      Subfinder Job No. \_\_\_\_\_

**DATE OF ABSENCE(S)**

1. List leave code in the row below designated in the Code box (e.g. record sick as S).  
2. List the number of hours away from work in the row below designated in the Hours box (e.g. 8 or 4).

From: \_\_\_\_\_/01/                      To: \_\_\_\_\_/31/  
                    Month/Day/Year                                      Month/Day/Year

		Date of the Month															
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Code																	
Hours																	
		17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Code																	
Hours																	

Total Leave Hours \_\_\_\_\_

I certify by signature below that all of the information provided on this form is true and correct. I understand that any leave or absence taken in excess of time available to me by contract or district policy will be deducted at my per diem, hourly rate, or substitute rate of pay, whichever is applicable.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Supervisor Approval

White: Timekeeper  
Pink: Employee