



Almont Community Schools

AESPA Absence Report

Employee Name _____ Date of Request: _____

Sick Leave

Report shall be submitted the first day after returning to work.

Personal Business Leave

Requests for personal business leave must be submitted at least 24 hours in advance so as to allow time for advance approval, except in emergency situations which preclude such advance submission notice.

Bereavement Leave

Shall be requested as soon as the need is known.

Vacation

Shall be requested as soon as the need is known. (Please use the appropriate form)

APPROVAL IS CONDITIONAL UPON HAVING THE DAYS ACCRUED

(It is the employee's responsibility to make certain leave time is available)

Number of Days requested: _____ Dates: _____

If partial day, time left for day: _____ Time returned: _____

Reason for Absence:

Sick Leave

_____ Self

_____ Family (Relationship)

Personal

_____ Personal Business

Other

_____ Jury Duty

_____ Other (explain)

Funeral

_____ Spouse, Child, Parent

_____ Other Relative

_____ Relationship

Supervisors Signature

Employee Signature

_____ Approved

_____ *Approved with Loss of Pay*

_____ Not Approved