

## CANTON ISD ABSENCE FROM DUTY REPORT

- For discretionary leave, this form must be submitted for approval prior to the time you are requesting to be absent from duty. Form must be submitted immediately upon return for all other leave.
- Absences of five or more consecutive days for personal or family illness must have a written statement from a health care practitioner attached.
- Leave requests will be granted in accordance with board policy DEC.

<b>Teacher Name</b>	<b>Date</b>	
<b>Department/Campus</b>	<b>Substitute Used</b>	
<b>Types of Leave</b>	<b>Date(s) of Absence</b>	<b>Full day (100%); ½ day (50% am/pm); or # hrs.</b>
<input type="checkbox"/> (30) State Personal Discretionary (personal business; maximum 2 days at a time; >2 days = docked)		
<input type="checkbox"/> (30) State Personal Non-discretionary (illness or medical appointment for self or family)		
<input type="checkbox"/> (10) State Sick Leave (Illness or medical appointment for self or family)		
<input type="checkbox"/> (20) Local Personal Not Docked (maximum 3 days per year)		
<input type="checkbox"/> (21) Local Personal Docked (maximum 2 days per year)		
<input type="checkbox"/> (40) Jury duty or subpoena (attach documents)		
<input type="checkbox"/> (50) School Business (staff development, student trip sponsor, etc.)		
<input type="checkbox"/> Other: Assault, Military, etc. _____		
<b>Employee Signature</b>	<b>Date</b>	
<b>Principal/Supervisor/Designee Signature</b>	<b>Date</b>	
<b>Leave Status:</b> <input type="checkbox"/> Approved – No dock <input type="checkbox"/> Approved - Dock <input type="checkbox"/> Disapproved		