

TODAY'S DATE _____

SOUTH POINT LOCAL SCHOOL DISTRICT

PERSONAL LEAVE REQUEST

I hereby request _____ day(s) personal leave.

to be effective _____ date(s).

Signature

Building

() Approved () Disapproved

Building Principal or Supervisor

Superintendent

CIRCLE

Number of ½ personal leave days taken this school year 1 2

A maximum of two half day personal leaves are allowed per school year.
All other personal leave time will be charged as a full day.