



## Putnam County School District REQUEST FOR EXTENDED PERSONAL LEAVE

**MUST BE REQUESTED IN ADVANCE AND WILL NOT BE APPROVED RETROACTIVELY**

**TO BE COMPLETED BY EMPLOYEE - MUST SIGN IN FRONT OF LOCATION EXECUTIVE SECRETARY**

<b>Employee:</b>	<b>Date:</b>
<b>Address:</b>	
<b>Telephone:</b>	
<b>Department/Location:</b>	
<b>Position:</b>	
<p>I understand this leave must be requested in advance and will not be approved retroactively. I also understand Extended Personal Leave without pay is absence for 30 or more days without a guarantee of the same position or location or either.</p>	
<b>Reason for Request</b>	
<p><i>"Personal" is not an acceptable reason for a personal leave of absence. A valid reason must be given. Attach doctor's note if applicable.</i></p>	
<b>Type of Extended Personal Leave Requested:</b>	
<input type="checkbox"/> <b>29 Day Limited Leave</b>	
Beginning Date:	Ending Date:
<input type="checkbox"/> <b>For Remainder of this School Year</b>	
Beginning Date:	Ending Date:
<input type="checkbox"/> <b>For School Year</b>	
Beginning Date:	Ending Date:
<p><b><i>This request for Extended Personal Leave for the entire school year will not be approved for more than two (2) consecutive school years.</i></b></p>	
<b>Return to Position after Extended Leave</b>	
<p><b><i>29 day Limited Leave - I understand it is my responsibility to inform you of my return date prior to my returning to work. If a doctor's note took me out of work, a doctor's note is required for my release to return to work.</i></b></p>	
<p><b><i>Extended Leave -An employee who plans to return to duty at the expiration of an extended leave will notify the administrator in writing by March 15<sup>th</sup> of the school year for which the leave was granted. In the event the leave was granted after March 15<sup>th</sup>, the employee's intent to return to duty at the expiration of the leave will be deemed given upon requesting leave. On or before February 15<sup>th</sup>, the Board will notify each employee on leave of this provision. The employee will respond, indicating his/her intent to return, request an extension, or resign from his/her position. Except for extenuating circumstances, an employee who fails to respond will be considered to have resigned with an effective date of his/her last duty day of the fiscal year. ~ PFT Contract Article 20 F.</i></b></p>	
<p><input type="checkbox"/> <b>(Employee Initials)</b> I have read and understand the <b><i>Return to Position after Extended Leave</i></b> Information. I also understand it is my responsibility to notify my employer of my return to work date and status.</p>	
Employee Signature	Date
Location Executive Secretary Witness Signature	Date
<b>Administrator Approval</b>	
<input type="checkbox"/> <b>Approved</b>	<input type="checkbox"/> <b>Disapproved</b>
Administrator Signature	Date
<b>DISTRIBUTION:</b>	
Original – Staff Services, Attached to C-13; Copy – Employee; Copy – Department/Location	