



**Report of Absence of Personnel**

Employee's Name : \_\_\_\_\_ Employee #: \_\_\_\_\_

Position : \_\_\_\_\_ School/Dept: \_\_\_\_\_

Date(s) of Absence \_\_\_\_\_ Total Hours: \_\_\_\_\_

**Reason for Absence (check):**

- Vacation                       Illness                       Personal Necessity                       Furlough Days
- School Business Leave                       Jury Duty                       Worker's Compensation                       Negotiations
- Unpaid Personal Leave                       Maternity/Paternity                       Bereavement (relationship): \_\_\_\_\_

| Name of Substitute | Date(s) Worked | Total Hours |
|--------------------|----------------|-------------|
|                    |                |             |
|                    |                |             |
|                    |                |             |

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To the best of my knowledge and belief, the above is a true and accurate statement of the facts in relation to the employee's absence.

Signature of Lead Administrator: \_\_\_\_\_ Date: \_\_\_\_\_



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|--------------------|----------------|-------------|
|                    |                |             |
|                    |                |             |
|                    |                |             |

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To the best of my knowledge and belief, the above is a true and accurate statement of the facts in relation to the employee's absence.

Signature of Lead Administrator: \_\_\_\_\_ Date: \_\_\_\_\_