

**MOUNTAIN PINE SCHOOL DISTRICT  
ABSENCE REPORT FORM**

*Use this form to report all absences.  
Complete as far in advance as possible for all absences except emergencies.  
Submit to Principal or Supervisor*

Name	
School/Department	
Date(s) of Absence	<input type="checkbox"/> Full Day <input type="checkbox"/> AM Only <input type="checkbox"/> PM Only
Substitute Needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Preferred Substitute	<input type="checkbox"/> Sub Teach Notified

**Reason for Absence:**

<input type="checkbox"/> <b>Sick Leave</b> – Illness or Injury (of employee or immediate family)
<input type="checkbox"/> <b>Bereavement Leave</b> – death of a member of the immediate family (This will be taken from the employee sick leave days)
<input type="checkbox"/> <b>Jury Duty or Witness Leave</b> – attach a copy of the subpoena or court order
<input type="checkbox"/> <b>Military leave</b> – attach a copy of military orders
<input type="checkbox"/> <b>FMLA</b> – Family Medical Leave Act (Complete forms in the Personnel Policies Manual and attach with form)
<input type="checkbox"/> <b>Personal Leave</b> - Must be approved in advance by building principal or supervisor
<input type="checkbox"/> <b>Professional Leave</b> – Must be approved in advance by building principal or supervisor. <b>Attach a copy of the approved training registration with this form.</b>
<input type="checkbox"/> <b>School Business</b> – Anything that does not involve Professional Development. Must be approved in advance by building principal or supervisor. <b>List what the leave was for:</b>
<input type="checkbox"/> <b>Vacation</b> – Must be approved by the Superintendent in advance.

**Submit in advance if you are requesting professional, jury, FMLA, military, personal, Dr. appointments, and vacation leave. Submit the day you return to work to the building principal.**

**I certify that this is a true statement of the reason for my absence.**

Employee Signature:	Date:
Principal or Supervisor Signature:	Date: