

Bayshore School District
Record of Absence

Bayshore Elementary

Bayshore District Office

Employee name _____

Date absent _____ Full Day Partial _____ (hours)

Reason for Absence

Sick Leave

Personal Necessity Leave *Reason must be noted:*

- Additional bereavement leave
- Accident involving the staff member's person or property, or the person or property of the staff member's immediate family
- Appearance in court as a litigant, or as a witness under official order (documentation must be attached). (Must submit 5 days in advance.)
- Adoption of a child (Must submit 5 days in advance.)
- Birth of a child
- Religious holidays or family events which are not planned by the member, as mutually agreed upon by the member and immediate supervisor. (Must submit 5 days in advance.)
- Other emergencies, which are not planned by the member and which cannot reasonably be deferred to another day or time.

No-Tell Leave (Must submit 5 days in advance.)

Worker's Comp

Bereavement*

Jury Duty (Attach copy of subpoena or certificate of the clerk)

Conference/Workshop (Please attach documentation if applicable)

Vacation (12 month employees only)

*Staff members shall be entitled to a leave on account of death of any member of the immediate family. Members shall receive three (3) days leave; if out of state or more than 300 miles of one way travel is required, two (2) additional days shall be provided. An additional two (2) days shall be provided if the death is a spouse, domestic partner, or child of the unit member.

Employee Signature _____

Date _____

Supervisor Signature _____

Date _____