EAST WINDSOR PUBLIC SCHOOLS REQUEST FOR ABSENCE FORM – WORK RELATED REASON

Employees of the East Windsor School District desiring permission to be absent from their assignment for any professional day purposes must complete this form. Complete one sheet for each request (duplicate copy no longer necessary). Fill out and submit this form to your building administrator (and Director of Special Education, if applicable) for approval. Your request will be forwarded to Central Services where a determination will be made by the Director of Curriculum. You will receive an email confirmation from Central Services once the determination has been made. Please Note: Approval must be obtained prior to the requested date(s). Other Professional Development Professional Meeting/Service Check one: In District Committee Work Out-of-District Field Trip Employee's Name (print) _____ Date of Request _____ School Permission is requested to be absent on the following date(s) and time(s): Date(s) Time(s) Request is for: Full-Day Half-Day a.m. p.m. Reason for Absence:_____ Location: Focus and purpose for attendance/explanation of how the professional development aligns with district, school, and/or team goals: Is a substitute needed? Yes No Kelly Confirmation #: I understand that I may be required to share information from this professional development with others at the request of administration. **EMPLOYEE SIGNATURE:** _____ (To be completed by Administrator) **CONFERENCE COSTS:** To be completed for **all** conference, workshop, and seminar attendance. ♦ Conference information must accompany request ♦ Administrator funding conference must complete and attach a purchase order ♦ Employee **must** submit receipts for all expenses Code: _____ Title: Budget Line: APPROVALS Approved Not Approved Date: Principal: Reason: Director of Special Education: (if applicable) Approved Not Approved Date:_____ Director of Curriculum: Reason: