

PORT JERVIS CITY SCHOOL DISTRICT
Request for Personal Business Leave - Support Staff

Name: _____ School: _____

Date of Filing Request: _____

Request for Personal Business Days must be submitted to the building principal/supervisor at least two days before the requested leave is to take place. REQUEST FOR PERSONAL BUSINESS LEAVE IMMEDIATELY BEFORE OR IMMEDIATELY FOLLOWING A VACATION OR HOLIDAY WILL NOT BE HONORED, EXCEPT IN EXTENUATING CIRCUMSTANCES, WHEREIN A REASON MUST BE PROVIDED. Two (2) or more consecutive personal days constitute extenuating circumstances. When a personal day is taken due to an emergency where no prior request for leave time is possible, the employee must complete this form, including the reason for the personal leave day, upon returning to work. Personal Business Leave must always conform to the need for the proper operation of the school/department. The Principal's or Supervisor's judgment of the effect of such leave on the program of their school/department will be most important in the determination to grant or not to grant it. The Employee's annual sick leave may be used for personal business days under the same conditions outlined in the employee's contract. The nature of an absence classified as Personal Business need not be disclosed by the employee, except in the case of extenuating circumstances or emergency requests.

Criteria:

The employee shall be authorized to use personal leave only to conduct personal business that cannot be scheduled during their normal working hours.

Reasons for Personal Leave Days shall not include the following:

1. Recreational or leisure activities
2. Shopping
3. Pursuit of what could normally be constructed as gainful employment or profit-making endeavors
4. Vacations
5. Extending school vacations or other days on which school is not scheduled on the school calendar

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In compliance with the criteria stated above, I request Personal Business Leave on

_____ (Date of Leave)	_____ (Employee's signature)
* * * * *	* * * * *

PRINCIPAL/SUPERVISOR'S RECOMMENDATION: In my judgment, the above request

_____ SHOULD _____ SHOULD NOT be approved.

Signed: _____
(Principal or Supervisor)

* * * * *

SUPERINTENDENT'S DECISION: _____ APPROVED _____ DISAPPROVED

Signed: _____
(Superintendent)

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EXTENUATING CIRCUMSTANCES:

Attach a separate sheet for special Personal Business Leave requests or emergency personal leave time only. Personal Business Leave for extenuating circumstances will be at the sole discretion of the superintendent.