



# POLAND CSD ABSENCE FORM

## STEP 1: ALL EMPLOYEES

Today's Date: \_\_\_\_\_ Date of Absence: \_\_\_\_\_

Employee's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Start/End Time of Absence: \_\_\_\_\_

Time Substitute is Needed: \_\_\_\_\_

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

## STEP 2: ONLY FOR STAFF WITHOUT AESOP/ FRONTLINE ACCOUNT FOR SUB CALLING If an absence is sick time, the form is complete after marking the sick time in the gray box.

|   |  |   |
|---|--|---|
| Choose one of these:  |  |   |
| Sick time for me: <input type="checkbox"/> YES  | Sick time for family: <input type="checkbox"/> YES | FMLA Time: <input type="checkbox"/> YES |
| Advance notice of sick time is encouraged for hiring substitute coverage. An employee who does not complete the form in advance of an absence (due to illness), must complete the form immediately upon return to work. |  |   |
| Submit your form to the person who completes/submits payroll or to the Business Office.   |  |   |

## ★ STEP 3: FOR STAFF WITH AN ABSENCE THAT IS NOT SICK TIME AND & PCS AIDES, CSEA, AND CLERICAL STAFF WITH EARNED VACATION TIME

Personal (urgent or legal business)    Vacation    Jury Duty    Bereavement for: \_\_\_\_\_

Approved    Rejected   Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_, 2019

Other  
Personal Absence A Personal Day that does not meet contract specifications but that may be allowed by the Superintendent.

Explain Situation: \_\_\_\_\_

NO vacation day requests or personal (other use) requests are to be scanned or deemed "approved" without a supervisor AND superintendent signature.

## SUPERINTENDENT'S DISPOSITION: (This is necessary when absence is Personal (other) or a Vacation Day.

Approved    Rejected   Superintendent Signature \_\_\_\_\_ Date \_\_\_\_\_, 2019

Employee Sent Copy by \_\_\_\_\_ Date: \_\_\_\_\_