

PRINT NAME: \_\_\_\_\_



ENEMY SWIM DAY SCHOOL PP#: \_\_\_\_\_

**REQUEST FOR LEAVE** (attach documentation if applicable):

(Is a substitute needed for this leave?): \_\_\_\_\_

**Type of Leave:**

- Educational
- Training
- Administrative
- Paid
- Unpaid/LWOP
- Other

DATE		TIME		Total Time
Beginning	Ending	Beginning	Ending	

Total Hours Requested: \_\_\_\_\_

Classroom: \_\_\_\_\_

Recess: \_\_\_\_\_

Lunch Room: \_\_\_\_\_

Arranged Sub: \_\_\_\_\_

Other: \_\_\_\_\_

Remarks: \_\_\_\_\_

Signature/Date: \_\_\_\_\_

Supervisor/Date: \_\_\_\_\_

For office use only