NOVATO UNIFIED SCHOOL DISTRICT CERTIFICATED PERSONAL NECESSITY LEAVE REQUEST

To Request Personal Necessity Leave: complete form, sign (employee and supervisor), and send to Human Resources

Full Legal Name (REQUIRED):		Employee ID #:
T dii Legai Name (<u>Newolkeb)</u> .		Lilipioyee iD #.
Position:	Location:	Date:
PERSONAL NECESSITY LEAVE: Does this request fall in designated staff development days, or during the first five (do not have to complete the form. If yes – (requires committed)	5) days and/or last five	e (5) days of the work year? If not, you
Date(s) of PN Leave Request:		Total PN Days:
Reason (for committee approval if applicable):		
** ALL ABSENCES MUST BE ENTERED BY THE EMPLOYEE IN ABSENCE MANAGEMENT **		
Employee Signature (REQUIRED):		Date:
Supervisor Signature (<u>REQUIRED</u>):		Date:
Leave is for instances of personal or professional need and will 12:3.2 A unit member may use seven (7) days of personal need before or after recesses or holidays, on designated staff developedays of the work year. Personal necessity days may not be used above is emergency situations with reason given. 12:3.2a When an employee wishes to use Personal Necessity days of school or the last five (5) days of school, they may submextenuating circumstances that warrant a review and permission Resources Director and a representative selected by NFT. 12:3.3 The Superintendent or designee has discretion and magnitudes.	essity leave except whe pment days, or during t d for recreation or vacat ays before/after holiday nit a written request to n. This committee woul y require proof of all pe	en such days are requested immediately the first five (5) days and/or last five (5) tion purposes. The exception to all the y breaks/recess, or during the first five (5) a committee. Reasons would be for d consist of the Superintendent, Human ersonal necessity.
number of teachers expected to be absent on a particular day exadditional teachers requesting personal necessity leave to resc school year except during the first and last five (5) days of the ward	xceeds the number of a hedule their leave. This	vailable substitutes, the District may ask
Committee Approval (before/after holiday break; during first/la Date: □ Approved □ Denied Reason for denial:	ast 5 days of school ON	NLY) Committee initials:

Initials:

Staff Results emailed

Date: