

PROFESSIONAL PERSONAL DAY REQUEST

Name: _____

Date: _____

I would like to request _____ as a personal day.
Date Requested

Signature

Per the agreement between the Epping School Board and the Epping Education Association, Article V, Section F Part 3, the request is:

_____ approved _____ not approved

Reason not approved:

_____ Days to exceed the limit of 3 per year

_____ Notification not given prior to 48 hours of requested day.

_____ Date requested falls on a day prior to or immediately following a school holiday or vacation.

Principal Signature _____

Date _____