



**ADMINISTRATIVE FORM**

**REQUEST AND APPROVAL FOR LEAVE**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Library Director will provide the Library Board with at least two weeks advance notice of vacation leave. Library Staff will provide at least two weeks advance notice to the Library Director. Requests for sick leave should be filled out upon returning to work.

LEAVE BEGINNING: Date: \_\_\_\_\_ Time: \_\_\_\_\_

LEAVE ENDING: Date: \_\_\_\_\_ Time: \_\_\_\_\_

\_\_\_\_ Sick Leave

\_\_\_\_ Vacation

\_\_\_\_ Holiday

\_\_\_\_ Other

TOTAL HOURS REQUESTED: \_\_\_\_\_

A note from a doctor is required if sick leave is greater than three (3) days.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(For Director's Leave) Board Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Effective: 3/11/2005

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