

BRAZOS INDEPENDENT SCHOOL DISTRICT

PERSONAL LEAVE REQUEST

DAY AND DATE PERSONAL LEAVE WILL BE TAKEN

DAY:

DATE:

FULL OR 1/2 DAY:

_____AM / PM_____
_____AM / PM_____
_____AM / PM_____
_____AM / PM_____

Printed Name of Employee

Signature of Employee

Date submitted

Approved: ____yes ____no

Administrator Signature

NOTE: Personal leave may be taken two days consecutively and must have 3 day prior approval by principal or superintendent.