

NEW HAVEN UNIFIED SCHOOL DISTRICT

AUTHORIZATION FOR EXTRA WORK DAYS AND RELEASE TIME
CLASSIFIED

To be used by the principal or other designated administrator to authorize classified employees under his/her jurisdiction to receive extra work days and release time. This form must be submitted to the Executive Director, Personnel or designee ten (10) working days before the event. ***IF THE REQUEST IS FOR MORE THAN FIVE (5) WORKING DAYS, IT MUST BE AUTHORIZED BY THE EXECUTIVE DIRECTOR, PERSONNEL, OR DESIGNEE.**

TO: Executive Director, Personnel

FROM: _____ Title: _____

Authorization for extra work days is being requested for the following employee(s)

EMPLOYEE	ASSIGNMENT- SITE	* OF EXTRA HOURS	BUDGET

DATE/S: _____

REASON: _____

Approving Administrator: _____ Date: _____

*IF REQUEST IS FOR MORE THAN FIVE (5) WORKING DAYS	
<input type="checkbox"/> Authorization Request Approved	<input type="checkbox"/> Authorization Request Not Approved
_____	_____
Chief Business Officer	Date

Copies: (1) Payroll; (2) Personnel; (3) Originator