

# D.L.S.I.S.D ABSENCE-FROM-DUTY REPORT

- Nondiscretionary leave is taken for personal or family illness, emergency, death in the family or active military service. This type of leave allows very little or no advance planning and will be granted to employees in the same manner as sick leave.
- Discretionary leave is taken for personal business. Discretionary personal leave shall not be used immediately proceeding or following a school holiday, days scheduled for end-of-semester exams, days scheduled for STAAR tests or professional or staff development days, except in extenuating circumstances as determined by the Superintendent or designee. Leave requests should be made 3 days prior to the leave, and will be granted in accordance with board policy DEC.
- An employee absent more than 5 consecutive workdays because of personal illness shall submit, upon return to work, a medical certification of illness and of his or her fitness to return to work. An employee absent more than 3 consecutive days because of illness in the immediate family shall present, upon return to work, medical certification of the family member's illness.

|  |                  |                  |                       |
|--|------------------|------------------|-----------------------|
| Date   | Name             | Employee ID. No. | Number of Days Absent |
| Department/Campus  | Dates of Absence |                  |                       |
| <b>Reason For Absence</b>  |                  |                  |                       |
| <input type="checkbox"/> <b>Personal illness or medical appointment</b><br>Is illness or injury work-related? <input type="checkbox"/> Yes <input type="checkbox"/> No |                  |                  |                       |
| <input type="checkbox"/> <b>Medical appointment or illness of family member</b><br>Specify relationship:   |                  |                  |                       |
| <input type="checkbox"/> <b>Death in family</b><br>Specify relationship:   |                  |                  |                       |
| <input type="checkbox"/> <b>Personal Leave</b>   |                  |                  |                       |
| <input type="checkbox"/> <b>Jury Duty or Subpoena</b> (attach documents)   |                  |                  |                       |
| <input type="checkbox"/> <b>Staff Development or School Business</b><br>Specify:   |                  |                  |                       |
| <input type="checkbox"/> <b>Vacation</b><br>Specify Days:  |                  |                  |                       |
| <input type="checkbox"/> <b>Comp Time Hours</b>  |                  |                  |                       |
| Employee signature   |                  |                  | Date                  |
| Principal/Supervisor/Superintendent signature  |                  |                  | Date                  |
| Leave status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied  |                  |                  |                       |

Revised-11-11-14

- ❖ **Form must be filled out for each absence**
- ❖ **Original must be sent to the Business Office with all signatures**