

## Almont Community Schools

### AEA Absence Form

Employee Name (print): \_\_\_\_\_ Today's Date: \_\_\_\_\_

#### Personal Leave

No more than six (6%) percent of the teaching staff shall be allowed to be absent for personal business on any one work day unless mitigating circumstances occur. **Personal days may not be used immediately before or after a school break (e.g. Christmas break, spring break, etc.) only upon Superintendent approval.** Unused Personal Days at the end of each school year are non-accumulative as personal days. However, such unused personal days shall be converted into the employee's accumulated sick leave at the end of the year.

#### Sick Leave

Sick leave, with pay, shall be granted for bona-fide personal illness or quarantine, serious illness in the immediate family, or death of a near relative up to a total amount of ten (10) days in each teaching year, with the unused portion accumulating to the particular teacher's credit, to a total of sixty (60) days. The employee must notify Administration or his/her designee twelve 12 hours before the official start of the school day of an employee's illness, barring emergencies.

#### Bereavement

Days with pay shall be granted to the employee in the event of a death in the immediate family or of a near-relative:

- One - Three days, if 200 or less miles one-way travel is involved.
- One - Five days, if more than 200 miles one-way travel is involved.
- One day per year for death of a person that is not immediate family or extended family

#### **APPROVAL IS CONDITIONAL UPON HAVING THE DAYS ACCRUED**

It is the employee's responsibility to make certain leave time is available.

Number of Days Requested \_\_\_\_\_ Date(s) \_\_\_\_\_

If partial day A.M P.M Date \_\_\_\_\_

Reason for Absence:

#### Sick Leave

#### Personal Leave

#### Other

\_\_\_\_\_ Self \_\_\_\_\_ Personal Business \_\_\_\_\_ Bereavement (relationship)  
\_\_\_\_\_ Family (Relationship) \_\_\_\_\_  
\_\_\_\_\_ Jury Duty

Are requested days immediately before or after a scheduled school break (circle): **YES** or **NO**

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

Supervisor Signature \_\_\_\_\_ Superintendent Signature \_\_\_\_\_  
\_\_\_\_ Approved \_\_\_\_ Not Approved \_\_\_\_ Without Pay \_\_\_\_ Approved \_\_\_\_ Not Approved (if necessary)

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