

Personal, Funeral, Family Illness or Jury Day Request

AFT Members

Name	School	Date Requested	Full Day	Half Day
No Sub Required (please check box) <input type="checkbox"/>				
Date Submitted <i>(must be 48 hours in advance, except where not possible)</i>				
Please circle the category of use: <div style="display: flex; justify-content: space-around; text-align: center;"> Funeral Personal Family Illness Jury Duty </div>				
<p><u>For Funeral Leave</u> Please state your relationship to the deceased:</p> <p><i>(Funeral leave is intended for immediate family members as defined in this list: spouse, child, step child, son-in-law, daughter-in-law, grandchild, great grandchild, parent, step parent, parent-in-law, sibling, sibling-in-law, grandparent, great grandparent, aunt, or uncle.)</i></p>				
<p><u>For Personal Leave</u> Please state reason:</p> <p><i>Personal leave may be granted only for pressing personal reasons that cannot be attended to in non-working hours.</i></p>				
<p><u>For Family Illness</u> Please state the relationship of the family member:</p> <p><i>The employee may apply up to 15 accrued sick days per year for the care of immediate family members. Immediate family is defined as an employee's: spouse, child, step child, grandchild, sibling, sibling-in-law, parent, parent-in-law, step parent, aunt, uncle, grandparent, and great grandparent.</i></p>				
<p><u>For Jury Duty</u></p> <p><i>You must notify the Superintendent in writing within one day of being notified of jury duty. You will be paid for the first five days of jury duty, less the jury duty pay.</i></p>				
_____ Employee's Signature		_____ Date		
<ul style="list-style-type: none"> <input type="radio"/> Your request has been approved. <input type="radio"/> Your request has not been approved. 				
<p>Comment:</p> <p>_____</p> <p>_____</p>				
_____ Supervisor's Signature		_____ Date		