

Lanett City Schools

PROFESSIONAL LEAVE REQUEST FORM

Date Form Submitted _____

I, _____, request to take

_____ For leave indicated below.
(Date)

[] Field Trip (with your class; explanation) _____

[] Athletics

[] Professional Leave – (explanation) _____

[] Jury Duty/Military Leave _____

SUBSTITUE: _____

(Employee Signature)

(Principal, if Applicable)

(Approved by Superintendent)

(Date Approved)