

EAST WINDSOR PUBLIC SCHOOLS

APPLICATION FOR LEAVE

*Please fill out this form electronically and email it to your building administrator.
Provided you have the personal leave when entered into Kelly Services, your leave will be approved.*

EMPLOYEE'S NAME _____ SCHOOL _____

POSITION _____

EMPLOYEE'S SIGNATURE _____ DATE OF REQUEST _____

PERSONAL LEAVE

(Please select Certified or Classified and fill out requested information under your selection)
This request must be received in the School Office at least 3 days prior to the leave, except in unusual situations.
Personal leave cannot be used to extend vacation periods or holidays.

Certified Personnel: Consult Article 21 in EWEA Contract

of Personal Days taken to date: _____ (It is the employee's responsibility to ensure accuracy)

Date(s) of Leave Requested:	Comments (ex. Floating Holiday):	Request is for:	Full Day	Half Day
				AM
				PM

Substitute Needed: YES NO

Kelly Conf. #: _____
(required)

Classified Personnel: Consult Article XV in the Classified Contract

of Personal Days taken to date: _____ (It is the employee's responsibility to ensure accuracy)

Date(s) of Leave Requested:	Comments (ex. Floating Holiday):	Request is for:	Full Day	Half Day
				AM
				PM

Substitute Needed: YES NO

Kelly Conf. #: _____
(required)

TO SUBMIT THIS FORM - SAVE AS A PDF FILE AND EMAIL AS AN ATTACHMENT TO YOUR ADMINISTRATOR.