## EAST SIDE UNION HIGH SCHOOL DISTRICT Certificated Personnel Absence Report

NAME	: <u></u>		DATE:						
	Last			First					
Emplo	yee ID#:_				LOC: _				
Date(s) Absent:									
FTE(s) Absent:									
			-		· · · · · ·		ree periods is to b	e reported as .6 of	a day.)
E	MPLOYEE	ILLNESS (C	BA - Article 6.	.12) - Person	al illness or in	jury.			
L a e	llowable for mployee or	r death of a m r spouse of e	nember of his mployee, spo	/her immedia ouse, son, so	nte family. (Mon-in-law, dau	lother, father,	grandfather, ter in-law, bi	avel beyond 3 grandmother, other, sister of the sister of	, grandchild o
	NDUSTRIA	L ACCIDENT	LEAVE (CBA	- Article 6.4)	- Work relate	d illness or inj	ury.		
		' (CBA - Articl meal allowan		oyee is to reir	mburse the D	istrict for fee r	eceived while	e on jury duty,	excluding
	IILITARY L	EAVE (CBA -	Article 6.10)	- Must be em	ployed in the	District for on	e year or mo	re to qualify.	
<u>PERS</u>	ONAL N	ECESSITY	LEAVE (CI	BA - ARTIC	LE 6.7)				
1	1. Death or serious illness of immediate family member (this is in addition to regular bereavement leave if more than								
	three (3) or five (5) days are taken). (CBA - Article 6.7.2.1) Specify relationship:								
2	. Accident	involving pers	son or proper	ty of employe	ee or membe	of his/her im	mediate fami	ly. (CBA - Art	icle 6.7.2.2)
	Specify:								
3	. Adoption	of a child. (	CBA - Article	6.7.2.3)					
4	. Child bea	aring/rearing p	oreparation. (	CBA - Article	6.7.2.4)				
5	•	ır (4) days of ce. (CBA - Aı	•	ersonal nece	ssity leave m	ay be utilized	I for reasons	of compelling	personal
	5.1			-		of the employers or concerted a	-	/s shall not fall A - Article 6.7.2.	5.1)
	5.2		e four (4) days . (CBA - Article		st two (2) work	king days' adva	nce approval f	from the immed	iate
NOTE:	stipulated necessity Personal not auth	d above. Exc y leave requi l necessity le orized, unde	ept for numberres prior app ave will be or r which circu	ers 1, 2 and s roval of the considered for mstances the	5.1 above, fo Principal and or those sign e employee	r which no pri d Associate S ificant events	for approval is Superintende s for which propagation is anably be ex	n any one school is necessary, ont of Human baid leave of pected to dispense.	all personal Resources. absence is
	Human F	Resources. It	t may be use	ed in those	cases where		d sick leave	sociate Super has been ex	
SUB	STITUTE(	S):							
		Emplovee's	Signature			Principal	l's Signatur	<u> </u>	_

This form must be used as a record of each absence of the certificated employee. It must be completed, signed and returned to the Principal's Office the day following the absence.