



Alabaster City Schools
Employee Absence Form

Complete this form and turn in prior to planned absence.

To: (Principal/Supervisor)_____

From (please print):_____

Date(s) to be absent:_____

Date submitted:_____

Reason for absence: _____ Personal Illness
_____ Personal Leave
_____ Professional Leave*
_____ Jury Duty**
_____ Vacation
_____ Military
_____ Other_____

(Please explain)

****Approved Professional Leave Form required***

*****Copy of summons and copy of check after Jury Duty service required***

Substitute Required? Yes___ No___ Name of Substitute_____

Substitute Phone(s)_____

Employee Signature

Date

Approved_____ Not Approved_____

Principal/Supervisor

Date