Rocklin Academy Family of Schools

Employee Absence Request ☐   Employee Absence Notification ☐   Today's Date _____

Employee Name _____

Date(s) Requested	Absence Code	Absence Time	# of Hours (Classified) or Days (Certificated)
_____	_____	____:_____ to ____:_____	_____
_____	_____	____:_____ to ____:_____	_____
_____	_____	____:_____ to ____:_____	_____
_____	_____	____:_____ to ____:_____	_____

Codes: PN = Personal Necessity***   PD = Professional Development***   SB = School Business***
         DA = Doctor's Appt. (sick time)   B = Bereavement (Personal Necessity)   VAC= Vacation (Year Round Classified only)
         JD = Jury Duty (Attach Notice)   UP = Unpaid Absence   OTH = Other _____

*** Additional Explanation required. Include specifics.

Reason: _____

_____   _____

Employee Signature   Date

Request approved ☐   Request Denied ☐   Notification Acknowledged ☐

_____   _____

Supervisor's Signature   Date

Sub Required ☐   Sub NOT required ☐   Internal Coverage ☐

☐ Entered in Aesop

☐ Sub Request Filled

☐ Veritime Record Updated

Notes:

Rev. 10/02/2018r