

**Teton School District No. 401**

**PERSONNEL**

**5400F**

Leaves of Absence Request Form

Date of Request \_\_\_\_\_

Name \_\_\_\_\_

Dates Requested \_\_\_\_\_

\_\_\_\_ Approved

\_\_\_\_ Not Approved

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Superintendent (if needed)

\_\_\_\_\_  
Date

Policy History:

Adopted on: August 10, 2009

Revised on: May 17, 2010