

APPLICATION FOR DISCRETIONARY LEAVE
Geneseo School District ESP

I, _____ request to be
(employee's name)

granted leave without pay on the following date(s):

From _____ to _____

This leave is requested for the purpose of:

I have used or already received permission to use _____ days of discretionary (unpaid) leave this school year prior to this request.

date

signature of employee

This request shall be submitted to the Building Principal and then to the Superintendent's Office.

Building Principal

date

Approved by: _____
Superintendent (or designee)

date