400.1

**RESA-6**

30 G.G. & P. Road

Wheeling, WV 26041

**EMPLOYEE APPLICATION TO BE ABSENT FROM WORK**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, request to be absent from

work on

Please select and mark the one kind of absence you are requesting:

(Check one only. Use a different form for each type of absence.)

 Vacation Day(s)

 Personal Day(s)

\_\_ Calamitous Day(s) – Compensatory for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (dates)

\_\_ Outside School Environment

\_\_ Without Pay Day(s) – Reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Employee Date

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Principal of Immediate Supervisor Date

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 RESA-6 Executive Director Date

Return the Original to the Executive Director’s Office

The Executive Director’s Office will return three copies:

* Immediate Supervisor file Copy
* Substitute Employee Management Operator File copy
* Employee copy