**Request for Professional Leave**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Staff Member** | Click here to enter text. |  | **Date Submitted** | Click here to enter text. |
| **Directions: Please complete form electronically then print for submission of approval.** | | | | |

**The Request**

**Please check:**

|  |  |
| --- | --- |
|  | Regular school day |
|  | Staff development day |
|  | Other |

**Requested Date of Leave:**

Click here to enter text.

**Building Level Request:**

**District Level Request:**

**Nature/title of proposed activity:**

Click here to enter text.

**Funding Requested:** Click here to enter text.

**Registration:** Click here to enter text.

**Mileage:** Click here to enter text.

**Rationale for Request**

**Please check the area on which the request is primarily based:**

|  |  |
| --- | --- |
|  | School improvement goal |
|  | Curriculum implementation |
|  | Professional growth objective |
|  | Committee representation |
|  | Professional service |
|  | Co-curricular role |
|  | Professional organization, affiliation, leadership |
|  | Other professional need |

**Briefly and specifically describe how the activity is related to your students’ learning, present job assignment, professional growth plan, and/or other professional need.**

Click here to enter text.

**How will your in-district professional responsibilities for the date be met?**

|  |  |
| --- | --- |
|  | Substitute Teacher |
|  | No substitute required |

**Disposition of Request**

**This request is:**

|  |  |
| --- | --- |
|  | Approved |
|  | Denied |

**Reason for denial:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If approved….**

**Staff development experiences**

|  |  |
| --- | --- |
|  | Staff meetings |
|  | Grade level meetings |
|  | Team meetings |
|  | Department meetings |
|  | Brief synopsis |
|  | Handouts |
|  | Click here to enter text. |

**Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Initials of Principal/Staff Development Team Rep. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Funding:**

**Approved for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Referred to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Shared date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Administrative approval:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**