



Riverside School Board

REQUEST FOR A PART-TIME LEAVE OF ABSENCE WITHOUT PAY

The Policy on Leaves of Absences without Salary and Sabbatical Leaves with Deferred Salary indicates the following concerning: Short-term leaves of absence without salary - less than or equal to 10 working days

All employees are eligible for this leave as governed by the provisions of their collective agreements.

Requests for leaves without Salary from school level personnel who work directly with students **shall not be granted more than once in any three year period** if the leave is intended to extend a holiday period (Christmas, Easter) or the March break period. Furthermore, an employee absence that does extend one of these periods for reasons other than extenuating circumstances accepted by the Board must be accompanied by a medical note or the absence shall be processed as an unauthorized leave of absence.

In conformity with the provisions of the collective agreement, the policy and procedures regarding leaves of absence without pay, as stated above, I,

Name: _____

School or Department: _____ Position: _____

request a part-time leave of absence without pay according to the following:

Reason for the request: _____

Period: For a complete school year: indicate the year: 20____ - 20 ____

For part of a school year from _____ to _____

I wish to be absent:

_____ day(s) per week [indicate day(s)] _____

Number [days(s)]

OR

LEAVE = _____ % of my regular workweek. Please note that each day of absence equals 20% of a workweek.

I have read the articles of the collective agreement pertaining to this subject as well as the policy and request this leave accordingly.

Signature of employee

Date

FOR THE USE OF IMMEDIATE SUPERIOR

I recommend the part-time leave of absence without pay request as described above yes no

Details or comments: _____

Principal or Director

Date

FOR THE USE OF THE HUMAN RESOURCES DEPARTMENT

The part-time leave of absence without pay request as described above is accepted refused

Period: From: _____ to: _____

% of leave: _____ or _____ day(s) per week.

Details: _____

Kim Barnes
Director of Human Resources

Date

c.c. Union
Principal or Director