

# VACATION

All employees who are employed for 12 months are entitled to paid vacation time as determined by the Board of Education.

To regulate the number of personnel who may be away at any given time, please complete the attached form and have your Principal/Supervisor approve and forward to the Superintendent.

1. Name \_\_\_\_\_

2. Dates requested (1<sup>st</sup> choice) \_\_\_\_\_

3. Dates requested (2<sup>nd</sup> choice) \_\_\_\_\_

4. Should it become necessary to call you, will you be able to leave an itinerary of your vacation where you can be reached?

Yes \_\_\_\_\_ No \_\_\_\_\_

If answer is yes, please leave a copy of your itinerary with the Building Principal and the Superintendent's Office before you leave for your vacation.

5. Dates approved: 1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_

\_\_\_\_\_  
Signature Principal/Supervisor

\_\_\_\_\_  
Signature of Superintendent