

REGULATION

PERSONNEL

6018.2

Board of Cooperative Educational Services
Madison-Oneida Counties
Verona, NY 13478

Personal Leave Request Form

Date: _____

Employee's Name: _____

Date(s) of Personal Leave:

I certify that the Personal Leave Day(s) listed above will not be used for any other employment and/or recreational purposes. (Vacation or Holiday use or extension of same will be considered a part of recreational purposes).

(Employee's Signature)

(Date)

(Administrator's Signature)

(Date)

(District Superintendent's Signature)

(Date)

Madison-Oneida Board of Cooperative Educational Services
Cross Ref: Regulation 6018.1, Personal Leave Requests
Promulgated: 2009
Revised: 07/12/12