WASHINGTON COUNTY BOARD OF EDUCATION P. O. BOX 1359 CHATOM, ALABAMA 36518

REQUEST FOR PERSONAL LEAVE

| EMPLOYEE | | |
|---------------------------------------|----|------------------------------|
| POSITION | | |
| DATE(S) REQUESTED FOR PERSONAL LEAVE: | .* | NO. OF HOURS TO BE TAKEN: |
| | | |
| | 2 | |
| | | |
| EMPLOYEE'S SIGNATURE | | DATE |
| | | |
| ACTION OF SUPERINTENDENT: Comments: | | |
| | | |
| Superintendent's Signature | | Date |