

**DULCE INDEPENDENT SCHOOL DISTRICT**  
**General Leave Request Form**  
**For Emergency/Extenuating Circumstance**

**THIS FORM SHOULD BE COMPLETED AND PRESENTED TO THE SUPERINTENDENT AT LEAST THREE (3) DAYS PRIOR TO THE DATE OF ABSENCE. FAILURE TO SUBMIT THIS FORM TIMELY WILL BE GROUNDS FOR DENYING THE LEAVE REQUEST.**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

DATE(S) OF ABSENCE: \_\_\_\_\_

EMERGENCY OR EXTENUATING CIRCUMSTANCE AND REASON FOR REQUEST:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach any pertinent documentation.

The Dulce Independent School Board Policy states: *“General Leave will not be granted on the last work day prior to or the first work day following a holiday, or on an in-service day, or during the first or the last five days of the school year. Extenuating circumstances will be considered on an individual basis. Daily contract pay will be deducted from an employee’s salary for each unauthorized absence or for any absence not meeting the criteria specified in the policy covering the leave for which the absence was authorized. Abuse of leave may be grounds for disciplinary action including termination or discharge.”*

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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OFFICE USE ONLY:

APPROVED \_\_\_\_\_ NOT APPROVED \_\_\_\_\_

SUPERINTENDENT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Original: To Payroll Dept.  
cc: Principal/Supervisor  
cc: Employee