



# Trousdale County Board of Education Personnel Leave Form

NAME: \_\_\_\_\_ Date(s): \_\_\_\_\_

SCHOOL: \_\_\_\_\_ Days Absent: \_\_\_\_\_

Organization: \_\_\_\_\_  
(Responsible for substitute payment if applicable)

- \*Sick Leave
- Personal Leave
- Vacation
- \*Non-Leave/Professional Leave
- \*Unpaid Leave
- \*Bereavement
- COVID-19 – 100% Paid Leave  
(Reasons 1-3 - Up to 2 weeks)
- COVID-19 – 2/3 Paid Leave  
(Reason 4 and 6 - up to 2 weeks)
- COVID – 19 – 2/3 Paid Leave  
(Reason 5 - up to 10 weeks)

Reason:

*\*I hereby attest that the cause of absence is true and correct. I understand that a falsified statement is grounds for dismissal.*

Signature: \_\_\_\_\_  
*Employee*

**SICK LEAVE** shall be defined as: illness.....from natural causes or accident, quarantine, or illness or death of a member of the immediate family.....,including the.....wife or husband, parents, grandparents, children, grandchildren, brothers, sisters, mother-in-law, father-in-law, daughter-in-law, son-in-law, sister-in-law, brother-in-law. Physicals and check-ups are allowable uses of sick leave.

A certificate from the physician.....may be required in support of any claim for sick leave.

“Non-certified employees shall present the immediate supervisor a physician’s certificate after three (3) days of absences stating the reason for being absent.”

**PERSONAL LEAVE** is subject to the following conditions: 1) Principal shall be given one (1) day’s notice, 2) Not more than 10% of the teachers are absent per given school, 3) Not during any prior established student examination period, and 4) Not if requested on a day immediately preceding or following a holiday or vacation period.

**VACATION LEAVE:** The Director or designee shall ensure the normal educational process is not disrupted by scheduling all employee vacation leave.

**UNPAID LEAVE:** All unpaid leave must have prior approval from the Director of Schools.

Approved: \_\_\_\_\_  
*Principal*

Date: \_\_\_\_\_

Approved: \_\_\_\_\_  
*Director*

Date: \_\_\_\_\_