

Winthrop Public Schools

PERSONAL DAY REQUEST

Name	:			
Positio	on:			
School:				
In accordance with the prorequest to use a personal d	ovisions of the appli	cable collective bargai	ning unit and school pro	
Date Requested	Check One:	Personal Day	Bereavement	Jury Duty
Date Requested	Check One:	Personal Day	Bereavement	Jury Duty
Date Requested	Check One:	Emergency Personal Day (From Sick Time)	Bereavement	Jury Duty
Employee's Signature			Date	
Per Article XXII, Section 3 c made in writing as early as p request is made less than nin forward the request to the su	ossible and not less t ety-six (96) hours bej	han forty-eight (48) hour	s before such absence whe	never possible. If the
ApprovedDeni	ed			Reason
Principal's Signature			Date	
Note: Please refer to the Per "No request for personal lea may be granted by the sole d	ve will be submitted s	so as to extend a holiday	or vacation period. Excep	
ApprovedDeni	ed			Reason
Superintendent's Signature			Date	