

Medford Area Public School District

Unpaid Leave Request Form

**Reference: Employee Handbook
Professional Staff, Section 7.4/ Support Staff, Section 7.7**

A staff member will be allowed two (2) unpaid days per school year. An unpaid day will result in a loss of pay. Unpaid leave deductions for professional staff members will be in one (1) hour increments and unpaid leave deductions for support staff will be made in 15 minutes increments. Additional unpaid leave requests will be considered on an individual basis. Additional days will result in a loss of pay as well as the pro-rated cost of health and dental insurance.

Staff members shall utilize form prepared by the District with respect to this leave.

Employee's Name: (print)	School:
Date(s) of requested unpaid leave:	
Reason for unpaid leave:	
Employee's Signature:	

For Office Use Only

- Unpaid Leave Approved
 - ▶ 1 day _____
 - ▶ 2 days _____
- Unpaid Leave request denied – Reason: _____

Principal Date District Administrator Date