

PRAIRIE CENTRAL COMMUNITY UNIT SCHOOL DISTRICT NO. 8
REPORT OF ABSENCE

Name

This is to report that I was absent from duty on _____ for _____ day(s) for:

- | | |
|--|---|
| <input type="checkbox"/> Personal Illness (PI)
<input type="checkbox"/> Family Illness (FI)
<input type="checkbox"/> Maternity Leave (ML)
<input type="checkbox"/> Death in the family (DF)
<i>(relationship to employee _____)</i>
<input type="checkbox"/> Vacation (V)
<input type="checkbox"/> Personal Leave (PL) <i>(If this box is checked, Personal Leave Request MUST be on file)</i> | <input type="checkbox"/> Conference/Workshop (CW) <i>(If this box is checked, Professional Leave Request MUST be on file)</i>
<input type="checkbox"/> Worker's Compensation (WC)
<input type="checkbox"/> Field Trip (FT) / ExtraCurricular (EC)

<i>(Description of FT/EC)</i>
<input type="checkbox"/> Jury Duty (JD)
<i>(District to receive reimbursement less mileage)</i>
<input type="checkbox"/> Deduction (D) <i>(If this box is checked, Request for Unpaid Leave MUST be on file or attached.)</i>
<input type="checkbox"/> Meetings/IEPs/Screenings (M)

<i>(Description of Meeting)</i> |
|--|---|

Employee's Signature

Date

DATE	SUBSTITUTE	DAYS or HOURS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

11.1.1 Sick leave shall be interpreted to mean personal illness, quarantine at home, or serious illness or death in the immediate family or household. For the purpose of sick leave, "immediate family" shall include parents, spouse, domestic partner, mother (step-mother, mother-in-law), father (step-father, father-in-law), daughter (stepdaughter, daughter-in-law), son (step-son, son-in-law), grandmother, grandfather, granddaughter, grandson, sister (step-sister, sister-in-law), brother (step-brother, brother-in-law), niece, nephew, aunt, uncle, anyone of whom the employee is a legal guardian, and any person living in the household of the bargaining unit member.

A maximum of two (2) days of sick leave may be used to attend the funeral of loved ones not included above.

The Board may require a physician's certificate as a basis of pay after an absence of three (3) consecutive days for personal or family illness, or as it may deem necessary. The Board may also require a physician's certificate as a basis of pay after absences totaling to eight (8) aggregate (non-consecutive) days for personal or family illness during a school year.