



Please submit your form to: Daniel Baker

Staff Member Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Grade: \_\_\_\_\_ Position: \_\_\_\_\_

Classroom Co-Worker (Elementary): \_\_\_\_\_

Reason For Request: \_\_\_\_\_

Date(s) Requested Off: \_\_\_\_\_  
(month, date, year)

Time Request off: \_\_\_\_\_  
(all day, half day, part day, etc)

Group Instructors: Groups & Times: \_\_\_\_\_

Substitute Needed For:  Math Group       Reading Group       Spelling Group       Classroom  
(please check all that apply)       Lunch Coverage       Recess Coverage       Carpool       Other (specify)

Teachers: I understand that missed time greater than the 5 days allotted as PTO (Personal time off) will be deducted from my pay and that I may be required to pay for my substitute through a payroll deduction.

Request received by: \_\_\_\_\_ Date Received: \_\_\_\_\_

**OFFICE USE**

Substitute Name: \_\_\_\_\_

Substitute Phone Number: \_\_\_\_\_

**PTO Time Remaining as of Last Payroll: Please see Connie Sims, HR Director csims@apamail.org**

If this was a same day emergency the staff member called in prior to 6:30 AM.    Yes \_\_\_\_\_ No \_\_\_\_\_

Admin. Director Initials: \_\_\_\_\_

Administrative Approval: Yes \_\_\_\_\_ No \_\_\_\_\_

Administrator Name: \_\_\_\_\_ Date: \_\_\_\_\_

Administrative approval on this form indicates that the absence request aligns with the staff handbook, in that the absence requested is for a purpose outside of the employee's control, such as a funeral, non-elective medical procedure, or other emergency. Non-approval indicates the request is for a purpose outside the approved purposes. Non-approved requests will still be processed and substitutes arranged for unless the employee notifies administration via email that they will be in attendance.

Please remember, "We do what's best for kids." It is best for kids to have their teachers and instructors present each and every school day. We so appreciate you and your dedication to all of our kids!!