

Leave of Absence Request Letter

Board of Trustees
School Name
Address
City / State / Zip Code

Dear Members of the Board:

I, _____, request a leave of absence from my
(Print Name)

position at _____, beginning _____
(Site) (Date leave begins)

through _____. The reason I am requesting a leave of absence is:
(Estimated leave ends)

Please check all that apply to this request:

- Sick Leave Beyond 5 days (please provide doctor's note)
- Extended Illness Leave (difference pay after sick leave exhausted)
- Workers' Compensation Leave
- Temporarily Disability
- Pregnancy Disability (Maternity Leave) Estimated Due Date:

- Child Raising / Adoption Leave
- Family Care Leave
- Professional Improvement
- Other – please attach explanation

Sincerely,

(Signature)

(Address)

(Telephone)

