

VACATION LEAVE

Employee _____

Position _____

Location _____

Date / Dates Used:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Employee's Signature

Principal's Signature

Superintendent's Signature

Substitute _____