

I'm not robot!

62731762528 150913690200 75759628.363636 80380722827 5432628.3166667 28303710261 12949141.835616 58822841.911765 116420591520 88472944 28813043298 20423129.709091 121117826700 70117651456 61030216824

Tina H. Torres
Roll Number: 14
Grade: XII
4th September 2010
To
Jonathan C. Salcido
Class Teacher
Anna School
India
Dear Mr Salcido,
I am Tina H. Torres, student studying in grade XII. My driving licence test has been scheduled at 11:00 am on the 5th of September and it happens to be a working day. I am afraid this appointment cannot be postponed. Kindly grant me a day leave so I could attend my driving test. I apologise for the inconvenience. Thank you for your time and consideration.
Sincerely,
Tina H. Torres

Application for Vacation or Sick Leave

Print Form

Year:

Name:

I request that I be granted ☐ Sick ☐ Vacation leave beginning Date: A.M. or P.M. Date:

through Time: A.M. or P.M. Date: Totaling Days: Hours:

Remarks or Explanation:

Should this request be for sick leave, I hereby certify that I was qualified to take sick leave in accordance with Campbell University's policy for sick leave and unable to attend to my official duties during the period for which application for sick leave is made above:

Approving Signature: Employee's Signature:

Date: Leave Forfeited By:

Types of Leave:
Annual Leave
Sick Leave
Civil Leave

INSTRUCTIONS - This form shall be forwarded to the Payroll Office in advance of taking leave. In circumstances where this is not possible, it shall be the responsibility of the supervisor to notify the Payroll Office by telephone if the employee does not have sufficient annual or sick leave to cover the absence. The form is to be completed and forwarded immediately after the employee returns to work. (ORIGINAL COPY) Given to Payroll Office. (COPY) is kept by employee.

Department of Youth Services School District
Sick Leave Bank Participant
Application for Loan

Days from the Sick Leave Bank shall not be awarded until all accumulated leave days have been exhausted.

All loans are subject to the approval of the Sick Leave Bank Committee.

The maximum number of hours/days that can be requested is 15 days/120 hours.

Employee's Full Name _____ Date of Request _____

School/Campus Name _____

LEAVE REQUEST DATES

DateHours

DateHours

DateHours

Total Hours Requested: _____

Reason for Leave _____

Signature of Employee _____

COMMITTEE'S DECISION

Original RequestRequest for Catastrophic Donated DaysRequest for Extension of Loan

APPROVED as requested

APPROVED with modifications

DENIED

Signature of Chairperson _____

Copy to Payroll AccountingCopy to Human ResourcesCopy to ApplicantSchool Administrator

12/12/17

School Leave Application

Linda Martin,

Roll 12,

Grade XII

18 September 2006

To

Mr, Ronald Lee,

Class Teacher,

Alaska International School,
Alaska

Dear Mr. Lee,

I am Linda Martin and am a student of grade XII. I was sick yesterday with running temperature and stomach upset. I could not attend school for the same reason. I understand that the test conducted yesterday was of utmost importance and I apologize for not being able to take it. However if you are kind enough to conduct it again for my benefit, I would be grateful to you. If that is not possible, I will understand the concern and I am ready to forego the marks for it.

Kindly consider my request.

Thanks

Sincerely,

Linda Martin

Find here more [Sample leave letters](#)

