

ROCKHILLSCHOOLEDISTRICTHREEDFYORKCOUNTY

Request

			(UseCode)	Explanation (excluding illness, personal leave, or vacation)

Signature of Person Requesting Leave

Code:

- *1 - Sick Leave/Personal Illness
- *2 - Personal Leave (5 days per school year)
- *3 - Family Illness
- +4 - Death Leave (Immediate Family)
- *5 - Long Term Illness (more than 10 days)
- *6 - Maternity Leave
- *7 - Injury on the Job
- +8 - Military Leave (15-day limit)
- 9 - District In-service or Meeting
- ^C - Professional Leave (Out of District)
- ^ Includes Virtual Meetings not hosted by our District
- +D - Jury Duty
- E - Vacation
- G - Leave Without Pay (Unpaid Leave)