## WORCESTER COUNTY PUBLIC SCHOOLS

## PERSONAL BUSINESS LEAVE REQUEST

Name:

School: \_\_\_\_\_

Full time benefited WCPS employees are entitled to three (3) days of personal business leave per year without loss of salary exclusive of sick leave. For **teachers**, only three teachers may be absent from a school at any one time for this reason. More than three teachers could be absent when, if in the judgement of the principal, the conditions warrant it. **Employees using personal leave on a regular school day (section A) will not be required to state the reason for such leave.** 

Employees seeking to use personal business leave on the day preceding or following a holiday or for Superintendent approved leave without pay, must be made in writing to the Superintendent. Personal business leave days, on the day preceding or following a holiday, cannot be used for recreation, vacation or shopping. The Superintendent shall have sole discretion on this matter and the Superintendent's decision is final. (Section B)

Employees may obtain more details on the use of Personal Business Leave by reviewing the negotiated agreements for their bargaining unit. Certificated employees should review Article XII, Leave Policies, 2.a.1.2.3 and Support employees should review Article XII, Leaves, 2.

**Section A: Regular School Day(s)** – In accordance with the negotiated agreements, the employee indicated above is planning to use personal business leave on the following date(s) which are Regular School Days (not before or after a holiday or a day without pay). Section A is processed at the School or Building level and does not require Superintendent approval.

Section B: Use of Personal Leave Day Before or After a School Holiday; or Leave Without Pay Require Superintendent Approval – In accordance with the negotiated agreement, I am requesting to use personal business leave or leave without pay on the following date(s) (check to indicate personal business leave [PBL] or leave without pay [LWP]):

Date: PBL or □ LWP	Date:	PBL or LWP	Date: I	PBL or LWP
<ul> <li>Regular school day (Section A)</li> <li>Holiday/Leave without pay (Section</li> </ul>	B)			
		Employee Signature		Date
<ul> <li>Approved</li> <li>Approved without pay</li> <li>Denied</li> </ul>				
		Principal/Administrator Signature		Date
Section B Requests Only				
<ul> <li>Approved</li> <li>Approved without pay</li> <li>Denied</li> </ul>				
		Superintendent Signat	ure	Date