



**St. Rose of Lima Catholic Academy**  
**A Catholic EL Education School**  
*Forming Excellent Catholic Scholar and Faithful Disciples of Jesus*  
 Denver, CO

**Personal Leave Request Form**

<b>First Name</b>	<b>Last Name</b>

**Today's Date:**

**Role:** *(Select One)*

Teacher      Maintenance      Custodial      Cafeteria      Daycare      Administration

Other: \_\_\_\_\_

**Type of Leave:** *(Circle One)*

**Personal Leave                      Sick Leave                      Bereavement Leave**

*\*Note: Personal days cannot be taken the day before or after a Holiday, and on either the first or last day school unless there are extenuating circumstances. These must be preapproved by the principal. Sick days are to be called in the evening before or morning of the sick day.*

**With or Without Pay:** *(Circle One)*

**With Pay                      Without Pay**

*\*Note: If you are not requesting a sick day, bereavement day, if you have used up your two personal days, or if you do not wish to use one of your two allotted personal days, the designation will be "Without Pay."*

**Date(s) Being Requested:**

**Comments:**

*\*Please review and keep this for your records. Should you need to make any changes, please resubmit your request. Thank you!*