



Absence Exception Request Form

Date: _____

Name: _____

School/Site: _____

Position: _____

Date(s) of Black Out Day(s) Absence: _____

Explanation:

Documentation: Examples of documentation include but are not limited to doctor notes, appointment slips, flight itineraries, reservation information, etc.

Employee Signature: _____

Administrator: Approve Deny

Administrator Signature: _____

Employee must submit this form to the Payroll Department Attention: Christa Rees