

GADSDEN CITY HIGH SCHOOL PAYROLL LEAVE FORM

Date Submitted: _____

Leave dates: List **date(s)** *you are requesting leave:*

Payroll Code:

_____	_____
_____	_____
_____	_____

Unexpected leave dates: List **date(s)** *you were absent:*

Payroll Code:

_____	_____
_____	_____
_____	_____

Payroll Codes: A Sick Day
 Y Personal (State Provided)
 EP Extra Personal
 XP Purchased extra day

Name of Substitute: _____

Your Signature _____

Approved by: _____

Keith Blackwell, Principal