

**North Kitsap School District No. 400**  
**ABSENCE REPORT OR APPLICATION FOR LEAVE FORM**

\_\_\_ **PSE of NK**    \_\_\_ **SEIU**    \_\_\_ **NKAAA**

NAME \_\_\_\_\_

SCHOOL \_\_\_\_\_

POSITION \_\_\_\_\_

DATE OF THIS APPLICATION \_\_\_\_\_

LEAVE REQUESTED \_\_\_\_\_ to \_\_\_\_\_ = \_\_\_\_\_ DAY(S) OF LEAVE  
starting date                      ending date

IS SUBSTITUTE NEEDED?        (YES)        (NO)        TIME TO REPORT \_\_\_\_\_

**Type of Leave Request**

- |                               |                                       |
|-------------------------------|---------------------------------------|
| ___ Sick Leave                | ___ Leave of Absence/LWOP*****        |
| ___ Disability/Maternity***** | ___ Military Leave****                |
| ___ Birth/Adoption**          | ___ Family Leave****                  |
| ___ Family Illness*           | ___ Association/District Related***** |
| ___ Bereavement***            | ___ Emergency*****                    |
| ___ Jury Duty & Subpoena***   | ___ Use of Compensation Time***       |
| ___ Vacation**                | ___ Personal**                        |

- Codes: (\*)    *Requires explanation*  
          (\*\*)    *No explanation required; approval of supervisor & superintendent/designee required*  
          (\*\*\*) *Requires explanation & supervisor's approval*  
          (\*\*\*\*) *Requires explanation; approval of supervisor and Superintendent/designee required.*

Explanation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_

Employee

\_\_\_ Approved \_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

Supervisor

\_\_\_ Approved \_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

Superintendent/Superintendent's Designee