ATTACHMENT O - Request for Unpaid Leave for Reasons Other Than Those Specified in the Master Contract

I request unpaid leave (dock days) on _____, _____, _____
month day(s) year

for the following reason(s):

_____

_____

This form must be filled out and submitted to the Superintendent at least two (2) days in advance (except in emergency situations). Unpaid leave (dock days) shall not be denied or approved on an arbitrary or capricious basis.

_____
Employee's Name - Print

_____
Employee's Signature

_____
date

___approved ___disapproved

_____
Superintendent date