



DICKSON COUNTY BOARD OF EDUCATION

Danny L. Weeks, Ed.D., Director of Schools
817 North Charlotte Street, Dickson, TN 37055
Phone 615-446-7571 – Fax 615-441-1375

PERSONAL LEAVE REQUEST FORM

Name: _____

Date(s) of Leave: _____ Total # of days: _____

CHECK ONE:

- This leave will be:
- Personal Day
 - Without Pay
 - Other (specify) _____
(military, jury duty, etc)

Additional comments: _____

Signature Date

Name of substitute teacher: _____

Your request for personal leave has been: Approved

Disapproved

Reason for disapproval: _____

Principal's or Supervisor's signature Date