



# CUTLER-OROSI JOINT UNIFIED SCHOOL DISTRICT

## UNPAID Leave Request Form

Employee Name: \_\_\_\_\_ Work Site: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Position: \_\_\_\_\_ Hours worked per day: \_\_\_\_\_ Classified: \_\_\_\_ Certificated: \_\_\_\_

**Dates Requested:** From: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ To: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year Month Day Year

**Reason for Request:** Note: Generally, unpaid leaves of absence are discretionary on the part of the School Board. Some unpaid leaves are statutory and will be granted but require additional information and forms. Please contact the Personnel Department.

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Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal/Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### For Personnel Department Use Only

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Approved – Letter Sent: \_\_\_\_\_ By: \_\_\_\_\_  
Signature

Denied – Letter Sent: \_\_\_\_\_ By: \_\_\_\_\_  
Signature

Special Conditions: \_\_\_\_\_