

**WOODVILLE ISD  
ABSENCE FROM DUTY REPORT**

Employee Name: \_\_\_\_\_

Campus/Organization: \_\_\_\_\_

Date(s) of Absence: \_\_\_\_\_

Number of Days Absent: \_\_\_\_\_

Signature of Employee: \_\_\_\_\_

(Check one) Professional Personnel: \_\_\_\_\_

Paraprofessional / Auxiliary: \_\_\_\_\_

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Reason for Absence: \_\_\_\_\_

- \_\_\_ Personal Illness – Employee
- \_\_\_ Illness in Immediate Family                      Relationship \_\_\_\_\_
- \_\_\_ Death in Immediate Family                      Relationship \_\_\_\_\_
- \_\_\_ Other (Family Emergency/ Physical Assault on Professional Personnel, etc.)
- \_\_\_ Personal Leave, Jury Duty, Court Ordered Appearance, Military Leave, etc.
- \_\_\_ School Related / Workshop
  - Meeting Title: \_\_\_\_\_
  - Location: \_\_\_\_\_
  - Subject: \_\_\_\_\_
  - Athletics: (what sport?) \_\_\_\_\_

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Types of Leave: Choose One

- \_\_\_ State Leave (5/year accumulates) ....
- \_\_\_ Local Leave (3 / year)...
- \_\_\_ Birthday Day (Contract Teachers only – 1 per year)
- \_\_\_ Extended Leave
- \_\_\_ Jury Duty
- \_\_\_ Dock Day (overage of leave)\*
- \_\_\_ School Related / Workshop
- \_\_\_ Athletics

\*After all available leave is exhausted, employee will be charged for a full day of pay.

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Substitute Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Principal / Director: \_\_\_\_\_

Signature of Campus AESOP Manager: \_\_\_\_\_

Date: \_\_\_\_\_

Signature indicates this absence has been reconciled in the AESOP system.

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Payroll Office Use Only:

Earnings Code: \_\_\_\_\_

Dock Days: \_\_\_\_\_ @ \_\_\_\_\_

Local Leave Day(s) \_\_\_\_\_ @ \_\_\_\_\_

## ABSENCE FROM DUTY REPORT – NOTES AND EXPLANATIONS

EFFECTIVE MAY 30, 1995, SENATE BILL 1 REPLACED THE STATE MINIMUM SICK LEAVE PROGRAM WITH A MORE FLEXIBLE PERSONAL LEAVE PROGRAM. STATE SICK LEAVE EARNED THROUGH THE 1994-95 SCHOOL YEAR. HOWEVER, MUST BE RETAINED AS SICK LEAVE AND USED IN ACCORDANCE WITH EDUCATION CODE PROVISIONS THAT WERE IN PLACE PRIOR TO SENATE BILL 1. FOR ALL STATE LEAVE, THE DISTRICT PAYS THE SUBSTITUTE COST.

@ NOTES FOR PREVIOUS PAGE:

(1) IMMEDIATE FAMILY INCLUDES:

1. SPOUSE
2. SON OR DAUGHTER, INCLUDING A BIOLOGICAL, ADOPTED, OR FOSTER CHILD, A SON- OR DAUGHTER-IN-LAW, A STEPCHILD, A LEGAL WARD, OR A CHILD FOR WHOM THE EMPLOYEE STANDS IN LOCO PARENTIS.
3. PARENT, STEPPARENT, PARENT-IN-LAW, OR OTHER INDIVIDUAL WHO STANDS IN LOCO PARENTIS TO THE EMPLOYEE.
4. SIBLING, STEPSIBLING, SIBLING-IN-LAW.
5. GRANDPARENT AND GRANDCHILD.
6. ANY PERSON WHO MAY BE RESIDING IN THE EMPLOYEE'S HOUSEHOLD AT THE TIME OF ILLNESS OR DEATH.

(2) FAMILY EMERGENCY – IS LIMITED TO NATURAL DISASTERS OR LIFE-THREATENING SITUATIONS –  
EMPLOYEE OR IMMEDIATE FAMILY.

(3) STATE SICK LEAVE (ACCUMULATED PRIOR 1994-95 YEAR) MAY BE USED ONLY FOR PERSONAL ILLNESS OR FAMILY ILLNESS, FAMILY EMERGENCY, OR DEATH IN THE IMMEDIATE FAMILY.

(4) STATE PERSONAL LEAVE (ACCUMULATED AFTER 1994-95 YEAR):

- A. NONDISCRETIONARY: MAY BE USED FOR SAME REASONS EXPLAINED IN NOTE (3) ABOVE.
- B. DISCRETIONARY: TO BE TAKEN AT EMPLOYEE'S DISCRETION, FOR WHICH IT IS POSSIBLE TO SET A SCHEDULE IN ADVANCE.

A NOTICE OF REQUEST FOR DISCRETIONARY PERSONAL LEAVE SHALL BE SUBMITTED TO THE  
PRINCIPAL OR DESIGNEE TWO (2) DAYS IN ADVANCE OF THE ANTICIPATED ABSENCE.

DISCRETIONARY PERSONAL LEAVE MAY NOT BE TAKEN FOR MORE THAN THREE (3) CONSECUTIVE DAYS.

(5) LOCAL LEAVE (MAXIMUM OF THREE (3) DAYS PER YEAR):

**NOTE: EMPLOYEE IS CHARGED FOR THE SUBSTITUTE COST WHEN LOCAL LEAVE IS USED.**

- A. NONDISCRETIONARY: MAY BE USED FOR SAME REASONS EXPLAINED IN NOTE (3) ABOVE.
- B. DISCRETIONARY: MAY BE USED UNDER RULES EXPLAINED IN NOTE (4) ABOVE.

(6) EXTENDED LOCAL LEAVE MUST BE FOR PERSONAL ILLNESS OF THE EMPLOYEE ONLY AND BE APPROVED BY THE SCHOOL BOARD IN ADVANCE.

SIXTY DAYS MAXIMUM:

**FIRST THIRTY DAYS – SUBSTITUTE RATE DEDUCTED FROM EMPLOYEE PAY.**

**SECOND THIRTY DAYS – 75% OF EMPLOYEE'S PAY DEDUCTED.**