

THE COVENANT SCHOOL
33 Burton Hills Boulevard
Nashville, Tennessee 37215

NOTIFICATION OF EMPLOYEE ABSENCE

Name _____

Date(s) of Absence _____

Reason for Absence (check one and explain in "comments"):

_____ Professional Leave

_____ Personal Leave

_____ Sick Leave

_____ Bereavement Leave

Comments _____

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SUBSTITUTES(S) FOR THE ABOVE:

Name _____ Date _____

_____ Full Day(s)

_____ (Half Day(s))

Approved _____ Date _____