Iraan-Sheffield ISD

Absence From Duty Form

Employee: _____ Emp ID #: _____

Payroll Period:

Date(s)	Absence Reason	Substitute	Total # Days

_____ _____

Employee Signature: Principal Signature:

For Business Office Use Only:

Leave Summary	Days
Sick Leave	
Personal Leave	
School Business	
Jury Duty	
Other (specify)	

#1
#2
#3
#4
#5
#6