

**THE SCHOOL BOARD OF BROWARD COUNTY, FL
REQUEST FOR A BOARD APPROVED LEAVE OF ABSENCE**

Please email documentation to leaves@browardschools.com

TYPE OF EMPLOYEE: ☐ ADMINISTRATOR ☐ INSTRUCTIONAL ☐ NON-INSTRUCTIONAL

Name

Personnel Number

Address: Street, City, State, Zip Code*

***Mailing Address - If your address has changed, access Employee Self Service (ESS) to update your address.**

Area Code & Telephone Number (Home & Cell)

Position Title (Subject/Grade, if applicable)

Personal Email Address

Location Name & Location Number

I wish to request a leave of absence for the _____ school year to begin on _____.

TYPE OF LEAVE REQUESTED:

☐ **MATERNITY**
(Attach doctor's note)

☐ **CHILD REARING**
(Attach a copy of child's birth certificate)

☐ **PROFESSIONAL ENHANCEMENT**
Instructional Employee Only - Must have three (3) or more years of employment in Broward County.

☐ **PROFESSIONAL LEAVE WITHOUT PAY**
TSP Employees Only - Must have seven (7) years of full-time BCPS experience including three (3) years in a professional or technical position

PROFESSIONAL LEAVE/SPECIAL GRANT
TSP Employees Only

☐ **PERSONAL (Indicate reason below)**
An Instructional employee must have three (3) or more years of employment in Broward County to be eligible for Personal leave.

An Instructional Employee who took two (2) years of Leaves of Absence and returned to work is not eligible for a new leave during the subsequent school year.

☐ **MILITARY**
(Attach notice to serve papers)

☐ **WORK AT A BROWARD COUNTY CHARTER SCHOOL**

Name of School: _____

(Your Employment With This School Will Be Verified)

All leaves granted at the request of an employee shall be for a particular purpose or cause. My reason(s) for requesting this leave is:

According to Policy 4409, "An employee on personal leave may not be employed in any capacity other than as a substitute, a temporary part-time employee in the District, or as an employee at a Charter School."

In accordance with the Collective Bargaining Agreement between the District and the Broward Teachers Union, Article 23, Section M, an instructional employee may be employed in a teaching position outside of the District, while on leave.

I am aware that I may be eligible to apply for Family/Medical Leave (FMLA).

Employee's Signature

Date

Administrator's Signature

Date

If an Instructional employee, is the teacher in documentation or were you going to place the teacher in documentation? _____

Approved:

Denied:

Certification Expiration:

Employment Date:

Contract Status:

Previous Leaves:

Location's Leave Position Number:

Last Duty Date: