If balance is zero, report as Ext. Sick leave

### SICK LEAVE:
- **Dates:**
- **Hrs. or %day(s):**

### EXTENDED SICK LEAVE:
- **Dates:**
- **Hrs. or %day(s):**

### PERSONAL NECESSITY:
- **Part of Sick Leave**
- **Dates:**
- **Hrs. or %day(s):**

### PERSONAL BUSINESS:
- **(Faculty Employees Only)**
- **Dates:**
- **Hrs. or %day(s):**

### VACATION:
- **Dates:**
- **Hrs. or %day(s):**

### COMPENSATORY TIME:
- **(Classified Employees Only)**
- **Dates:**
- **Hours:**

### BEREAVEMENT LEAVE:
- **Dates:**
- **Hrs. or %day(s):**

### JURY DUTY:
- **Dates:**
- **Hrs. or %day(s):**

### IND. ACCIDENT & ILLNESS:
- **Date of Injury:**
- **Hrs. or %day(s):**

### OFF SALARY TIME:
- **(Ten & Eleven month Classified Employees Only)**
- **Dates:**
- **Hours:**

### FMLA:
- **Pre-approved**
- **Dates:**
- **Hrs. or %day(s):**

### OTHER:
- **Dates:**
- **Hrs. or %day(s):**

**CERTIFICATION:** I certify that all the information reported is correct.

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*Faculty report absences as a percentage of a day. All others report absences in hours.*