

PERSONAL DAY REQUEST FORM: TODAY'S DATE: _____
(Return to Mr. Westwood 24 hrs prior to your request) (Policy for Certified employees accrue 2 days per year (may use up to 5 days/year): 4 days for Classified employees. (Personal Days may not be used before or after a holiday or the last week of school, unless you have applied and received approval from the district)

NAME _____ GRADE _____

DATE(S) _____ YR _____ DATE(S) _____ YR _____

How many personal days do you have as of this date? _____

PRINCIPAL
APPROVAL _____ DATE _____