



**Scituate Public Schools**  
Scituate, Massachusetts

**NOTIFICATION OF ABSENCE**

Name: \_\_\_\_\_ School: \_\_\_\_\_

Date(s) of absence: \_\_\_\_\_

Reason for absence: (Fill in Number of Days to be Applied to Each Category)

Bereavement \_\_\_\_\_ Personal \_\_\_\_\_ Sick Leave \_\_\_\_\_

Family Illness \_\_\_\_\_ Professional \_\_\_\_\_ Without Pay \_\_\_\_\_

Jury Duty \_\_\_\_\_ Religious \_\_\_\_\_ Vacation \_\_\_\_\_

(Attach Copy of Summons for Juror Service) School Business \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Principal/Administrator

Approved  Disapproved -- Reason: \_\_\_\_\_

\_\_\_\_\_  
(for Central Office Use)

\_\_\_\_\_ day(s) to be deducted from pay

\_\_\_\_\_ day(s) to be charged to the following:

Bereavement \_\_\_\_\_ Professional \_\_\_\_\_ Vacation \_\_\_\_\_

Family Illness \_\_\_\_\_ Religious \_\_\_\_\_ Other \_\_\_\_\_

Jury Duty \_\_\_\_\_ School Business \_\_\_\_\_

Personal \_\_\_\_\_ Sick Leave \_\_\_\_\_

\_\_\_\_\_  
Superintendent

White – Applicant  
Yellow – Building Principal  
Pink – Business Office