

Fabens High School

Absence Request

Absence Information		
Employee Name:		
Department:		
Substitute Request:		
☐ My substitute binder is ready		
Type of Absence Requested:		
☐ Personal Business ☐ Doctor	☐ Family Illness	☐ Death in Family
☐ Personal Illness ☐ Jury Duty	☐ Emergency	☐ Vacation
Dates of Absence: From:	To:	
Reason for Absence:		
You need to give five (5) days notice for absences Personal days requested need to have three (3) of		rences, jury duty, and field trips.
Employee Signature		Date
Pri	ncipal Approval	
☐ Approved	· · · · ·	
☐ Rejected		
Comments:		
Principal Signature		Date