



REQUEST FOR LEAVE OF ABSENCE - NISGA'A TEACHERS UNION

Position: _____ Work Location: _____

Employee Name _____ Emp. #: _____

Date of Leave: _____

Time of Leave _____

Reason for Leave: MARK APPROPRIATE AREA WITH X (attach any pertinent document pertaining to leave)

- | | |
|--|--|
| <input type="checkbox"/> Compassionate Leave – G.2 | <input type="checkbox"/> Discretionary Leave – G.28 |
| <input type="checkbox"/> Bereavement Leave – Specify the Article - G.4 | <input type="checkbox"/> Jury Duty – G.30 |
| <input type="checkbox"/> NTU Union Business – G.21.1 | <input type="checkbox"/> General Leave – G.31 |
| <input type="checkbox"/> BCTF Union Business – G.21.2 | <input type="checkbox"/> Emergency Leave for Child & Family Member Illness – G.32 |
| <input type="checkbox"/> Leave for Nominations – G.22 | <input type="checkbox"/> Cultural Leave – G.35 |
| <input type="checkbox"/> Leave for Prov. Negotiations – G.22 | <input type="checkbox"/> Professional Development Leave
- must complete the NTU Pro-D form
- Submit at least two weeks ahead of time to the
Superintendent & Pro D Chair for approval |
| <input type="checkbox"/> Parenthood Leave – G.23 | <input type="checkbox"/> WCB – Director of Operations to be notified |
| <input type="checkbox"/> Paternity Leave – G.24 | |
| <input type="checkbox"/> Sick Leave– G.27 (attach supporting document) | |

Please do not book travel/appointment until you receive your leave form back. You must provide your backup for appointments upon your first day back.

Please attach all leave documents: meeting, training, workshop and PRO-D.

EXPLANATION: _____
Application must be submitted at least TWO weeks prior to date general leave required

Employee Signature _____ Date: _____

HRs Report / Recommendations

- Received and recommend approval with pay – comments: _____
- Received and recommend approval without pay – comments: _____
- Received and recommend leave be denied – comments: _____

Other recommendation/comments: _____

HR Signature _____ Date: _____

This is a district form duly adopted by the Board.
No applications will be considered unless submitted on this form.
Any attached pertinent documents will be photocopied and returned to applicant.
Original application to be submitted to the Board office by receiving supervisor.
This form shall precede approval of any leave except emergency cases.

Entered in SDS	
Date: _____	By: _____ initials