## **Bourne Public Schools**

36 Sandwich Road Bourne, MA 02532 508.759.0660 508.759.1107 (fax)

## **Request for Compensatory Day of Absence**

**Compensatory Day** cannot be requested or used until after attendance at staff orientation day before the start of school.

No more than 10% of the bargaining unit members in any building may take the same **Compensatory Day. Compensatory Day** may not be taken on another day when a workshop is scheduled.

**Compensatory Days** shall be granted on a first come, first served basis with mutual agreement between the bargaining unit members and the building principal. **Compensatory Days** are not cumulative.

Name:	
School:	
Date Requested for Compensatory Day:	
Signature of Employee	Date
******	******************
Your request for a Compensatory Day of absence as indicated above is Approved D Not Approved.	
Building Principal	Date
******************	*****************
Your request for a Compensatory Day of absent Approved Not Approved.	ce as indicated above is

Superintendent

Date

