

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

**Request for Personal Day of Absence**

**INSTRUCTIONS:** This form is to be submitted electronically to the Superintendent.

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

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

Date Requested: \_\_\_\_\_ Full: \_\_\_\_\_ Half: \_\_\_\_\_

Are the dates you request to be absent seven days subsequent to the date on which your request is being filed?  Yes  No

Reason for Personal Day (imperative personal, legal, household business or family matters) must be given.

Have you been granted other Personal Days during the current school year?  Yes  No  
If yes, how many? \_\_\_\_\_

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\*\*\*\*\*

Your request to be absent from your school duties for Personal Reasons as indicated above is:  
 Approved  Not Approved.

\_\_\_\_\_  
Superintendent

\_\_\_\_\_  
Date

Authorization Code: \_\_\_\_\_

