

SUFFOLK PUBLIC SCHOOLS

(Attach to field trip application requiring School Board approval)

Trip #: 21791

School: Nansemond River High School

Grade/Subject/Club/Team: DECA

Date of Field Trip: September 14-16, 2024

Destination: Jamestown 4-H Educational Center, Williamsburg, VA

Purpose: DECA Camp

Objectives: Students will participate in leadership workshops, competitive events, and team-building activities.

Approve

Disapprove

Andre Skinner
Director of CTE

6-27-2024
Date

Approve

Disapprove

AS
Chief of Schools

6/27/24
Date

School Board Action:

Approve

Disapprove

Clerk of the Board

Date

Travel Request Form

Please Note: Welcome to Suffolk City Public Schools Travel Tracker, your one-stop travel center. Within this software, you can submit student field trip requests, reserve an activity bus for a field trip or athletic event, and reserve a car for staff travel. If you have any questions or comments please email kevinprivott@spsk12.net or call (757) 925-5573.

Trip Number **21791**

* Category Travel With Students

* Type of Trip Field Trip

* Field Trip Event
Marketing/DECA

Trip Leave

* Date 9/14/24 Saturday

* Time 10:30 AM

Trip Return

* Date 9/16/24 Monday

* Time 3:30 PM

Trip Year/Week 2024-37

* Is this trip overnight, out-of-state, or greater than 200 miles one way? Yes

Comments NRHS DECA Camp

* Your School/Dept ⓘ
240 Nansemond River High
3301 Nansemond Parkway, Suffolk, VA 23435

* Main Destination ⓘ
Other (Type Below)
3751 4-H Club Rd, Williamsburg, VA 23185, USA

Destination Not Listed Jamestown 4-H Educational Center, 4-H Club Road, Williamsburg, VA, USA * Destination Name Jamestown

* Approximate Nbr of Miles Round Trip

Special Instructions for Permission Slip

Funding Source #1	School Allotment - Nansemond River High	Budget Code
Funding Source Desc		Budget Code Desc
Funding Approver		

Are funds payable to a third party? No
(Does venue require payment prior to trip?)

* Teacher / Advisor / Staff Name Candace Credle

* Teacher / Advisor / Staff Phone # 7573734650

Teacher / Advisor / Staff Email kristybrett@spsk12.net

Note: This email will receive the requester emails if different from requester

Emergency Contact Info Same as Teacher / Advisor / Staff

* Emergency Contact Name Candace Credle

* Emergency Contact Phone # 7573734650

* Grade Level(s) Making Trip
9
10

11

12

- * Description of group or person(s) making trip NRHS Deca Students
- * Educational Objective for Field Trip see attached

Number of Individuals Making Trip

* Male Adults	1	* Female Adults	3	Total Adults	4
* Male Students	10	* Female Students	10	Total Students	20

Need 1 adult(s) for 15 or more students.
Need 1 adult(s) for every additional 15 students.

- * Will the students be away from school during lunch? Yes
- * If so, will these students need packed lunches? No

Nbr Students 20 Teacher Candace Credle
Students will be away from school during the lunch period.

Additional Information

- * School will be billed for Mileage No
- * School will be billed for Driver No
- * What is the cost to the Student? \$165.00
- * Description of the funding source you will be using : fundraiser
- * Will a coach be driving the trip? No
- * If yes, please enter the coaches name. If no, enter NA. na

- * Will you be using external transportation (ex. plane, walking)? No

Vehicles Needed

- * Do you need vehicles? Yes

Check here to indicate trip is drop-off only Location

Check here to indicate trip is pickup only Location

Vehicle Pickup

* Date 9/14/24
* Time 10:30 AM

Vehicle Return

* Date 9/16/24
* Time 3:30 PM

Total Trip Hours 53.00

- * Type of vehicles needed to reserve Yellow Bus 
- * How many vehicles do you need? 1
Vehicle Guidelines: Elementary 64 and 77 passengers. Secondary 44 to 48
- * Need Lift? No

Nbr Wheelchair Slots 0 Nbr Safety Vests 0 Nbr Fold Down Seats 0

Special Needs

Comments or Details Concerning Needs

Vehicle Driver Information

Owner taylorbracy@spsk12.net
 Bid Id/Closing Date Not Found

Person Submitting Request kristybrett@spsk12.net
 Date Submitted

Field Trip Acceptance of Responsibility

By submitting this request, the trip sponsor (Teacher, Coach, Staff Member, etc.) is validating the following conditions:

1. Possess a current/valid Driver's License for the vehicle you will be driving
2. Absent of any medical condition, medications/alcohol/drugs that will impede the operation of a vehicle
3. You will obey all traffic laws while operating the vehicle
4. You will not "text" or operate any device that may distract you while driving the vehicle
5. Properly authorized use of a Suffolk City Public Schools vehicle for official travel
6. Will only transport authorized passengers for the purpose of official travel
7. The lift is to be operated only for wheelchairs.
8. Buses and vehicles must come back in good condition in order to avoid additional charges.
9. Buses and vehicles must be cleaned in order to avoid additional charges.
10. Elementary Schools must have 1 adult per every 10 students.

* I have read and understand the information above.

Yes

Level 01 Approval - Location Approval

Comment

Decision Approved

Name tinapaul@spsk12.net

Decision Date Jun 14, 2024, 2:45:24 PM

Level 02 Approval - Second Level Location Approval

Comment

Decision

Designated Approver keeshahicks@spsk12.net

Name

Decision Date

Level 07 Approval - Overnight/OOS Approval

Comment

Decision

Name

Decision Date



Application for Field Trip

Submit intact to the Athletic Director, Principal, or Bookkeeper/Secretary, at least 30 working days (6 weeks) prior to the scheduled date of the trip. All professional leave forms for this trip must be submitted with this form. All forms are to be done in blue or black ink only.

School/Organization NEHS DECA Date 6/11/24
Grade/Subject/Club DECA Teachers C. Credle, K. Perry

REQUEST FOR SPECIAL USE OF SCHOOL BOARD VEHICLE (Personal cars are not to be used to transport students)

Date of Field Trip 9/14/24 Time Departing School 9/14/24 10:30A Time Returning to School 9/16/24 3:30p

Destination: Jamestown 4-H Educational Center, 3751 4-H Club Rd, Williamsburg, VA 23185

School Bus Yes Number Needed 1

SPECIAL NEEDS BUS

Equipment Needed: W/C n/a PCR n/a Safety Vest n/a

School Car n/a Number Needed n/a

Non-School Board Transportation -	
Type:	<u>n/a</u>
Furnished	
By:	<u>n/a</u>

(School cars are not to be used to transport students)

Number of Students 20 Number of Classes 1

Overnight Trip? Yes No

Total Cost to Student \$165⁰⁰ *Other Costs Incurred _____

*Paid By Fundraiser

Names of Chaperones (Not including Teachers) n/a

Date Parental Permission Secured and Filed in Office _____

Trip Requested By: C. Credle

Trip Received By: Paul Date: 6-12-24

(Any field trip is subject to last minute cancellation due to local, state, national and/or international situations)

Transportation Cost Estimator

Nansemond River High School

2023-2024

Use this tool to determine the approximate cost of transportation for your upcoming trip. While this tool will give you an estimate of your cost, it may not be correct, as your trip may take more or less time than expected due to unforeseen circumstances.

This tool must be submitted with all other field trip forms in order for your request to be considered, regardless of the source of funding.

Name of Group: DECA Date of Trip: ^{Depart} 9/14/24 / ^{Return} 9/16/24
Name of Sponsor(s): Credle + Perry # of students: 20

Mileage

You MUST find the exact mileage for your trip. You cannot estimate the journey.

Trip Origin: ^{NRHS} 3301 Nansemond Pkwy, Suffolk, VA 23434

Trip Destination: Jamestown 4-H Educational Center
3751 4-H Club Rd, Williamsburg, VA 23185

a) 54.6 mi from origin

Returning to: 3301 Nansemond Pkwy, Suffolk, VA 23434

b) 53.7 mi from destination

Round Trip Mileage (a+b) = 108.3 miles
x \$3.00 per mile

1) TOTAL MILEAGE ESTIMATION: \$215.70

Time

Estimation (in hours) of time for your trip: 2 x \$18 per hour = \$36.00

2) TOTAL HOURLY WAGE ESTIMATION: \$36.00

Compute

Total from 1) \$215.70 + total from 2) \$36.00 = 3) Cost for one bus = \$251.70

Number of Busses Needed:

Total from 3) \$251.70 x number of busses required 1 = \$251.70
Cost of Trip

Signature of Sponsor:  Date: _____

Known Funding Source? No Yes (Explain) Fundraiser

Admin/Activity Director Only:

- NRHS Fund
- SAO Fund _____
- Club/Org/Ath Fund _____
- Other: _____

Approved

Denied

FIELD TRIP
CHAPERONE LIST

****By listing the chaperone's name, if a parent, you certify that they have an approved volunteer form. ON FILE!!**

TEACHERS

1. C. Czedke
2. K. Perry
3. R. Parke
4. N. Wright
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

****PARENTS**

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

SPECIAL EDUCATION TEACHERS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

TEACHER ASSISTANTS

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

SUFFOLK PUBLIC SCHOOLS
Field Trip Instructional Objectives

School Nansemond River High School

Person completing the form Candace Credle & Dr. Karen Perry

Grade Level 9th - 12th CTE Marketing DECA Students

Date of Trip September 14 - 16, 2024

Listed below are the instructional objectives for the requested field trip:

Objectives:	Correlated Standard of Learning:
Demonstrate critical thinking and problem-solving.	English: 6.1, 6.3, 6.4, 6.5, 6.6, 6.7, 6.9, 7.1, 7.3, 7.4, 7.5, 7.6, 7.7, 7.9, Mathematics: 6.1, 6.2, 6.3, 6.4, 6.5, 6.6, 6.10, 6.11, 7.2, 7.3, 7.8, 7.12, 7.13, 8.2, 8.4
Demonstrate listening and speaking skills.	English: 6.1, 6.2, 6.4, 6.6, 7.1, 7.2, 7.4, 7.6, 8.1, 8.2, 8.4, 8.6, 9.1, 10.1, 11.1, 12.1 History and Social Science: CE.1, CE.4, GOVT.1, USI.1, USII.1, VUS.1, WG.1, WHI.1, WHII.1
Demonstrate customer service skills.	English: 6.1, 6.4, 6.7, 7.1, 7.4, 7.7, 8.1, 8.4, 8.7, 9.1, 9.5, 9.6, 10.1, 10.5, 10.6, 11.1, 11.5, 11.6, 12.1, 12.5, 12.6 History and Social Science: CE.1, CE.4, GOVT.1, GOVT.16, USI.1, USII.1, VUS.1, WG.1, WHI.1, WHII.1
Collaborate with team members	English: 6.1, 7.1, 8.1, 9.1, 10.1, 11.1, 12.1
Demonstrate professionalism.	English: 6.1, 7.1, 8.1, 9.1, 10.1, 11.1, 12.1 History and Social Science: CE.1, CE.4, CE.14, GOVT.1, USI.1, USII.1, VUS.1, WG.1, WHI.1, WHII.1
Identify the purposes and goals of the student organization.	English: 6.1, 7.1, 8.1, 9.1, 10.1, 11.1, 12.1 History and Social Science: CE.1, CE.4, CE.14, GOVT.1, USI.1, USII.1, VUS.1, WG.1, WHI.1, WHII.1
Demonstrate leadership skills through participation in student organization activities, such as meetings, programs, and projects.	English: 6.1, 7.1, 8.1, 9.1, 10.1, 11.1, 12.1 History and Social Science: CE.1, CE.4, CE.14, GOVT.1, USI.1, USII.1, VUS.1, WG.1, WHI.1, WHII.1

Registration - What Is Included?

Saturday Arrival:

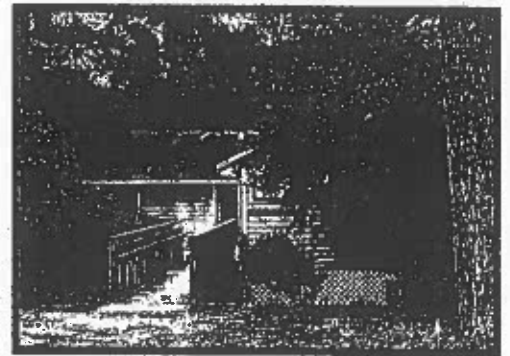
- Dormitory Style Lodging
- T-Shirt
- Workshops
- Keynote
- Kayaking ****Only for Saturday Arrivals
- Saturday Dinner, Sunday Breakfast, Lunch, Dinner, Monday Breakfast and Lunch
- Camp Sing Along and Smores
- Low Ropes Course
- Team Building Competitions

Sunday Arrival:

- Dormitory Style Lodging
- T-Shirt
- Workshops
- Keynote
- Sunday Lunch, Dinner, Monday Breakfast and Lunch
- Camp Sing Along and Smores
- Low Ropes Course
- Team Building Competitions

Lodging

- Dormitory Style Lodging
- All participants must share rooms.
- Sheets and linens are the responsibility of the camp participant.
- Chapters will share rooms with other chapters.



Dress Code

- Saturday/Sunday - Chapter/School/DECA T-shirts are encouraged with comfortable bottoms.
- Monday - Camp T-shirt and comfortable bottoms.
- Tennis Shoes for outdoor activities.
- Layers/Rain Gear
- While casual/athletic wear is recommended, students should remember this is a DECA event and should consult their chapter advisor before packing.

VA DECA Camp Needs to Know

- Students will be grouped with other chapters in a weekend-long competition. The competitions will be based on traditional camp activities, DECA activities, and team-building activities.
- Chapters arriving on Saturday will have the **option** to participate in Kayaking. Due to staffing and safety, this will only be offered on Saturday.
- Students will earn camp tickets throughout the weekend that can be traded in for DECA swag from our merch table.
- Chapters arriving on Sunday may add on lunch (12 pm).
- The opening session will begin at 1 PM on Sunday.
- Chapters arriving on Saturday will get a head start on some of the activities offered at the 4-H center. The focus will be on individual chapter team building.

Tentative Agenda

Saturday, September 14

- 12 PM - Earliest arrival time
 - Pick Up Rooming information and chapter schedule
- 1 PM - 4 PM 4-H Center team building activities
 - Kayaking
 - Archery
 - Low Ropes Course
 - More to Come!
- 5 PM - Dinner
- Evening Game Night and Activities

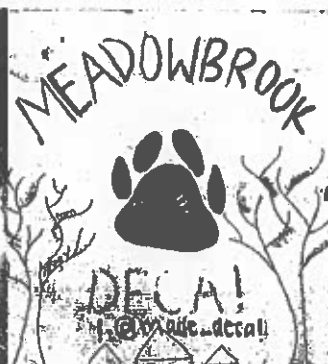
Sunday, September 15

- 8 AM - Breakfast Saturday Arrival Chapters
- 9 AM - 4-H Center team building activities
 - Archery
 - Low Ropes Course
 - More to Come!
- 12 PM - Lunch for Saturday Arrival Chapters
- 12 PM - Registration for Sunday Arrivals
- 1 PM - **Opening Session**
- 2 PM - Workshops/ Camp Activity Rotation
 - All attendees will have opportunities to participate in traditional camp activities
- 6 PM - Dinner
- 7 PM - Workshops
- Evening - Campfire Sing Along and Smores
- 11 PM - Curfew

Monday, September 16

- 8 AM - Breakfast
- 9 AM - Workshops/Activities
- 12 PM - Lunch
- 1 PM - Closing Session

Official programming starts on Sunday. Chapters may choose to add on Saturday to take advantage of more 4-H Center activities and chapter team building.



Nansemond River High School

3301 Nansemond Parkway
Suffolk, VA 23434
(757) 923-4101

Dr. Shaun Green, Principal
Kimberly Warholak, Assistant Principal

Tina Paul Assistant Principal
Darrell Medley, Assistant Principal

_____ (student printed name) has my permission to attend the *VA DECA Presents Camp DECA* field trip from September 14 - September 16, 2024. My student(s) must abide by the stated dress code below and may be removed from attending, if not dressed appropriately. **All** rules and regulations of Suffolk Public Schools apply while on the field trip.

All permission slips must be turned in by Monday, September 9, 2024

Destination: Camp DECA
150 Park Ave., Norfolk, VA 23510

Date of Trip: September 14-16, 2024

Time of Departure: Leave NRHS on September 14, 2024, at 10:30 AM

Approximate Time of Return: Monday, September 16, 2024 – 3:30 PM

Teacher/Sponsor: Mrs. C. Credle, Dr. Perry, Ms. Parker, Mr. Wright

Dress Code: Business Casual and Camp Attire - See Attachment

Investment \$165.00 - includes Transportation, Dormitory Style Lodging, T-Shirt, Workshops, Keynote, Kayaking
****Only for Saturday Arrivals, Saturday Dinner, Sunday Breakfast, Lunch, Dinner, Monday Breakfast and Lunch, Camp Sing Along and Smores, Low Ropes Course, and Team Building Competition

Meals Additional meals and snacks on your own

I agree not to purchase, possess, or consume any alcoholic beverage or other drugs while on this field trip. I agree to abide by all school rules and regulations concerning student behavior. I realize that I am representing Nansemond River High School field trip.

Signature of Student: _____ Date: _____
Student Signature: _____

Parent Name: _____ Date: _____
Parent Signature: _____

Field Trip Packet Checklist
Nansemond River High School
2023-2024

In order to ensure the smoothest processing of your field trip request, the following documents **MUST** be submitted as one packet, completed, and in the following order:

- Suffolk Public Schools Application for Field Trip (BF-6-15)**
 - Please do NOT use the triplicate version of this form! This makes processing much harder for all involved.
- Nansemond River HS Field Trip Bus Fee Estimator**
 - This form must be completed when using any SPS bussing, even if funding is secured through SAO/an outside agency.
 - If not utilizing SPS bussing, please still submit the form, but list N/A on the form to indicate that other transportation has been/will be secured.
- Suffolk Public Schools Field Trip Chaperone List**
 - Parents/guardians appearing on this list must already have their Suffolk Public Schools volunteer background check completed.
- Suffolk Public Schools Field Trip Instructional Objectives**
- Nansemond River High School Field Trip Permission Form**
 - This is the master copy of what you will provide the students, and also informs the main office of the details of your trip (time, date, etc.) so they may field any questions that arise.
- Suffolk Public Schools Professional Leave Request**
 - This must be completed on the triplicate form. (form can be found in the main office)
 - Please turn in with the completed packet for processing and do not separate.

Once all items are completed and in the order found above, please return all items to Ms. Paul for processing.

Note: The field trip packet will not be approved unless all required unless all necessary documents are included in your packet

Thank you for your cooperation!



SUFFOLK PUBLIC SCHOOLS

PROFESSIONAL LEAVE REQUEST

FORM WILL NOT BE ACCEPTED WITHOUT THE EMPLOYEE ID NUMBER AND JOB CODE

A COPY OF THE INVITATION, NOTICE OF ACTIVITY, PROGRAM OR OTHER DOCUMENTATION MUST BE ATTACHED

Renee Parker
EMPLOYEE NAME

17115
SCHOOL/LOCATION

EMPLOYEE ID NUMBER _____

JOB CODE _____

MONTH AND DATE(S) OF ABSENCE: 9/14-9/16/24

NUMBER OF DAYS REQUESTED 3 SUBSTITUTE REQUIRED: 9/16/24 - All Day
 YES NO

EXPLANATION OF ACTIVITY (NAME AND PLACE OF EVENT): VA DECA Parents Camp DECA

ESTIMATE OF EXPENSES:

DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
Registration	\$1500		
Transportation	\$1500		
		TOTAL	\$16500

I hereby certify that I am familiar with the School Board policy governing the absence above and the above information is true and accurate. I understand that all unexcused absences will result in loss of pay.

Renee Park
EMPLOYEE SIGNATURE

6/11/24
DATE SIGNED

I hereby certify that the above request complies with School Board policy, required prior approvals have been received and all documentation supporting this request has been submitted.

APPROVED DISAPPROVED

Paul
PRINCIPAL/SUPERVISOR SIGNATURE

6-12-24
DATE SIGNED

APPROVED DISAPPROVED

AUTHORIZED SIGNATURE

DATE SIGNED

ACCOUNT NUMBER _____

Completion of the absence form is the sole responsibility of the employee. Failure to complete the absence form within the time specified for completion will result in the absence being treated as unexcused and will result in loss of pay.



SUFFOLK PUBLIC SCHOOLS

PROFESSIONAL LEAVE REQUEST

FORM WILL NOT BE ACCEPTED WITHOUT THE EMPLOYEE ID NUMBER AND JOB CODE

A COPY OF THE INVITATION, NOTICE OF ACTIVITY, PROGRAM OR OTHER DOCUMENTATION MUST BE ATTACHED

Nicholas Wright
EMPLOYEE NAME

11534
EMPLOYEE ID NUMBER

NRHS
SCHOOL/LOCATION

JOB CODE

MONTH AND DATE(S) OF ABSENCE: 9/14 - 9/16/24

NUMBER OF DAYS REQUESTED 3 SUBSTITUTE REQUIRED: 9/16/24 - All Day
 YES NO

EXPLANATION OF ACTIVITY (NAME AND PLACE OF EVENT): VA DECA Presents Camp DECA

ESTIMATE OF EXPENSES:

DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
Registration	\$150 ⁰⁰		
Transportation	\$15 ⁰⁰		
		TOTAL	\$165 ⁰⁰

I hereby certify that I am familiar with the School Board policy governing the absence above and the above information is true and accurate. I understand that all unexcused absences will result in loss of pay.

Nicholas Wright
EMPLOYEE SIGNATURE

6/11/24
DATE SIGNED

I hereby certify that the above request complies with School Board policy, required prior approvals have been received and all documentation supporting this request has been submitted.

Paul
PRINCIPAL/SUPERVISOR SIGNATURE

APPROVED
 DISAPPROVED
6-12-24
DATE SIGNED

APPROVED

DISAPPROVED

AUTHORIZED SIGNATURE

DATE SIGNED

ACCOUNT NUMBER _____

Completion of the absence form is the sole responsibility of the employee. Failure to complete the absence form within the time specified for completion will result in the absence being treated as unexcused and will result in loss of pay.



SUFFOLK PUBLIC SCHOOLS

PROFESSIONAL LEAVE REQUEST

FORM WILL NOT BE ACCEPTED WITHOUT THE EMPLOYEE ID NUMBER AND JOB CODE

A COPY OF THE INVITATION, NOTICE OF ACTIVITY, PROGRAM OR OTHER DOCUMENTATION MUST BE ATTACHED

Candace Credle

EMPLOYEE NAME

9567

EMPLOYEE ID NUMBER

NEHS

SCHOOL/LOCATION

2 6 3 0

JOB CODE

MONTH AND DATE(S) OF ABSENCE: 9/14-9/16/24

NUMBER OF DAYS REQUESTED 3

SUBSTITUTE REQUIRED: 9/16/24-All Day
 YES NO

EXPLANATION OF ACTIVITY (NAME AND PLACE OF EVENT): VA DECA Presents Camp DECA

ESTIMATE OF EXPENSES:

DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
Registration	\$150.00		
Transportation	\$15.00		
		TOTAL	\$165.00

I hereby certify that I am familiar with the School Board policy governing the absence above and the above information is true and accurate. I understand that all unexcused absences will result in loss of pay.

[Signature]
EMPLOYEE SIGNATURE

8/11/24
DATE SIGNED

I hereby certify that the above request complies with School Board policy, required prior approvals have been received and all documentation supporting this request has been submitted.

APPROVED
[Signature]
PRINCIPAL/SUPERVISOR SIGNATURE

DISAPPROVED
6-12-24
DATE SIGNED

APPROVED

DISAPPROVED

AUTHORIZED SIGNATURE

DATE SIGNED

ACCOUNT NUMBER _____

Completion of the absence form is the sole responsibility of the employee. Failure to complete the absence form within the time specified for completion will result in the absence being treated as unexcused and will result in loss of pay.



SUFFOLK
PUBLIC SCHOOLS

PROFESSIONAL LEAVE REQUEST

FORM WILL NOT BE ACCEPTED WITHOUT THE EMPLOYEE ID NUMBER AND JOB CODE

A COPY OF THE INVITATION, NOTICE OF ACTIVITY, PROGRAM OR OTHER DOCUMENTATION MUST BE ATTACHED

Dr. Karen Perry EMPLOYEE NAME 012666 EMPLOYEE ID NUMBER

NRHS SCHOOL/LOCATION _____ JOB CODE _____

MONTH AND DATE(S) OF ABSENCE: 9/14 - 9/16/24

NUMBER OF DAYS REQUESTED 3 SUBSTITUTE REQUIRED: 9/16/24 - All Day
 YES NO

EXPLANATION OF ACTIVITY (NAME AND PLACE OF EVENT): VA DECA Presents Camp DECA

ESTIMATE OF EXPENSES:

DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
Registration	\$150.00		
Transportation	\$15.00		
		TOTAL	\$165.00

I hereby certify that I am familiar with the School Board policy governing the absence above and the above information is true and accurate. I understand that all unexcused absences will result in loss of pay.

Karen H. Perry EMPLOYEE SIGNATURE 6/11/24 DATE SIGNED

I hereby certify that the above request complies with School Board policy, required prior approvals have been received and all documentation supporting this request has been submitted.

Paul APPROVED DISAPPROVED 6-12-24
PRINCIPAL/SUPERVISOR SIGNATURE DATE SIGNED

APPROVED DISAPPROVED

AUTHORIZED SIGNATURE DATE SIGNED

ACCOUNT NUMBER _____

Completion of the absence form is the sole responsibility of the employee. Failure to complete the absence form within the time specified for completion will result in the absence being treated as unexcused and will result in loss of pay.