

MASCOMA VALLEY REGIONAL SCHOOL DISTRICT

PHONE 603.632.5563 - FAX 603.632.4181



SCHOOL BOARD

Application for Personal Leave **to extend a vacation or holiday**

Applicant Information

Full Name: _____
Last First M.I.

Phone: _____ Email: _____

Desired Date(s): _____

Holiday/
Vacation
Extending: _____

Have you asked for this consideration within
the past (5) years? YES NO

School
Location: _____ Position: _____

Hire
Date: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. This application is being submitted within the dates stated as part of Article 19.06.01 of the Professional Agreement.

Signature: _____ Date: _____