

EMPLOYEE RELEASE OF DUTY FORM

DATE \_\_\_\_\_

NAME \_\_\_\_\_

BUILDING \_\_\_\_\_

REASON FOR REQUEST FOR RELEASE OF REGULAR DUTY

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE (S) REQUESTED \_\_\_\_\_

TIME OF DAY (S) \_\_\_\_\_

SUBSTITUTE REQUIRED: YES or NO

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BUILDING PRINCIPAL \_\_\_\_\_ APPROVED  
SIGNATURE DISAPPROVED

SUPERINTENDENT \_\_\_\_\_ APPROVED  
SIGNATURE DISAPPROVED

cc: TREASURER'S OFFICE  
PRINCIPAL  
TEACHER