

# JMS TEACHER & STAFF ABSENCE FORM

*This form must be completed prior to absence and turned into the office. indicate the job number assigned by the substitute system. (AESOP System at [www.aesop.com](http://www.aesop.com) or 1-800-942-3767)*

Teacher/Staff Name: \_\_\_\_\_ Date Request Submitted: \_\_\_\_\_

- 1 – Authorized Sch Bus Off Campus
  - 2 – Authorized Sch Bus On Campus
  - 3 – Jury Duty
  - 4 – Local Personal Illness
  - 5 – Local Family Illness
  - 6 – Local Family Death
  - 7 – State Personal Illness
  - 8 – State Family Illness
  - 9 – State Family Death
  - 10 – State Personal Leave (5 days in advance)
- all approved absences for professional development, field trips, athletics, fine arts & competitions must have documentation attached to this form.*

\_\_\_\_ Absence Full Day  
\_\_\_\_ Absence ½ Day \_\_\_\_ AM or PM

Date(s) to be absent: \_\_\_\_\_

Job Conf #: \_\_\_\_\_

Absence Reason Code: \_\_\_\_\_

Approved & signed by: \_\_\_\_\_

J. Neal, Assistant Principal

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