

## **BEREAVEMENT LEAVE REPORTING FORM**

**INSTRUCTIONS:** Each principal is to fill out two copies of this form for each employee absence. One copy is to be turned in to the Central Office and one copy is to be maintained in the principal's office.

**EMPLOYEE'S NAME** \_\_\_\_\_

**DATE(S) OF ABSENCE** \_\_\_\_\_

**TOTAL HOURS THIS ABSENCE** \_\_\_\_\_

**TOTAL CONSECUTIVE DAYS THIS ABSENCE** \_\_\_\_\_

**REASON FOR ABSENCE** \_\_\_\_\_

\_\_\_\_\_

I hereby certify that the above is true and correct and that deductions from accumulated total Bereavement Leave as defined in Board Policy GARI-R shall be made.

\_\_\_\_\_  
**PRINCIPAL**

\_\_\_\_\_  
**EMPLOYEE**