



TAZEWELL-MASON COUNTIES SPECIAL EDUCATION ASSOCIATION

Administrative Office
300 Cedar St., Pekin, IL 61554

Application for Personal Leave

I _____ hereby apply for _____ day(s) of personal leave to be taken from
(Please print name legibly)

_____/_____/_____ until ____/____/____. If requesting a half-day please check: AM PM.
Month Day Year Month Day Year

Signature of Employee Date

Application for Vacation Leave (12 month employees only)

I _____ hereby apply for _____ day(s) of vacation leave to be taken from
(Please print name legibly)

_____/_____/_____ until ____/____/____. If requesting a half-day please check: AM PM.
Month Day Year Month Day Year

Signature of Employee Date

For Administrative Office Completion

Time Received: _____

Date Received: _____

Received by (Initials): _____

Approved Disapproved _____
Director Date

Upon completion the employee should turn in this form to the TMCSEA Administrative Office. An employee planning to use a personal business day shall notify his/her supervisor in writing at least one week in advance, except in cases of emergency. All personal day approvals proceeding and following holidays are subject to the availability of substitutes. No more than three (3) employees shall be on personal business leave at one time. A copy of approved or disapproved request(s) will be sent to the employee, program coordinator and personnel file.