

# KENMORE-TOWN OF TONAWANDA UNION FREE SCHOOL DISTRICT

## APPLICATION FOR LEAVE WITHOUT PAY

I request a leave of absence without pay from the Kenmore-Town of Tonawanda Union Free School District. I understand that while I am on leave I cannot work for the District in any capacity. I am requesting this leave for the following reason:

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If my unpaid leave is granted, my last day at work will be on: \_\_\_\_\_  
Month Day Year

My unpaid leave will start on: \_\_\_\_\_  
Month Day Year

I will return to work on: \_\_\_\_\_  
Month Day Year

ID#

\_\_\_\_\_  
Employee's Signature Position

\_\_\_\_\_  
Building Location Date

(PLEASE APPROPRIATE BOX)

<b>KA A CONTRACT SECTION</b>	<b>KT A CONTRACT SECTION</b>	<b>KTSEA CONTRACT SECTION</b>
7.3 CHILD CARE * <input type="checkbox"/>	10.4 CHILD CARE * <input type="checkbox"/>	11.03 FAMILY CARE * <input type="checkbox"/>
7.6 EXCEPTIONAL <input type="checkbox"/>	10.7.1 PERSONAL <input type="checkbox"/>	11.04 EXCEPTIONAL <input type="checkbox"/>
FMLA <input type="checkbox"/>	10.7.2 ACADEMIC YEAR <input type="checkbox"/>	FMLA <input type="checkbox"/>
	FMLA <input type="checkbox"/>	

\*ATTACH MEDICAL DOCUMENTATION

*The Kenmore-Town of Tonawanda U.F.S.D. and the Kenmore Teachers Association agree that all teaching personnel on unpaid long term leave, must notify the school district by **April 1<sup>st</sup>** regarding their intentions for the following school year. All forms will now state the requirement of notifying the district by **April 1<sup>st</sup>** of the employee's intent to return or resign. If an employee has not notified the district prior to **March 15<sup>th</sup>**, the district will contact the employee by certified mail at the address on record that the district will treat the failure to respond by **April 1<sup>st</sup>** as a resignation effective **April 1<sup>st</sup>**.*

Approved       Not Approved

\_\_\_\_\_  
Principal/Supervisor Signature Date

Approved       Not Approved

\_\_\_\_\_  
Assistant Superintendent for Human Resources Date

Remarks: \_\_\_\_\_

Board Approved \_\_\_\_\_