## **CAJON VALLEY UNION SCHOOL DISTRICT**

## Catastrophic/Calamitous Event Leave Bank Request Form

For Leave Bank Committee Use Only	
Date of Committee Meeting _	
Request Approved:	Request Denied:
Number of Days Allocated	
Date Employee Notified	

Note: This form is for use by Classified School Employees Association (CSEA) bargaining unit members only.

Legal Name Employee ID #	
School / Department Job Title	
I am requesting day(s) from the Catastrophic/Calamitous Event Leave Bank.	
Please provide a detailed description of the reason for your request on the lines below (attach any additional pages as necessary). This information will be maintained in strict confidentiality by the Calamitous/Catastrophic Event Leave Bank Committee. All requests for leave bank donations will be answered in writing within ten (10) workdays of the Committee's decision. Completed forms are to be submitted to the Personnel Services Department, Attention: Michelle Hayes, Assistant Superintendent of Personnel Services.	
Note: Please submit verification from your physician, if appropriate.	
Employee Signature Date	
If you have any questions concerning benefits or eligibility, please contact your CSEA representative.	