



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Leaves/Temporary Duty Elsewhere (TDE) Application

Employee ID
VOLUNTEER

Name (last, first, middle initial)	Position/Classification
School/Department Name	School/Dept. # 2201

I. Request for Leave of Absence

Total duty hours absent

I hereby apply for Leave of Absence (pursuant to School Board Policy 3.80 or collective bargaining agreement) on the following duty days. (List dates absent, identifying 1/2 days with A.M. or P.M.)

PAID LEAVE (choose one only)

- Sick (S)
- Personal (Charged to Sick Leave) (P)
- Vacation - 12 month positions only (A)
- Floating Holiday (FLH)
- Line-of-Duty Injury or Illness (LOD)(L)
- Jury Duty / Paid Witness Duty (J)
- Other (Explain)

UNPAID LEAVE - less than 10 unpaid days (choose one only)

- Extended Illness
- Maternity / Recovery / Child Care
- Other Personal
- Personal (To be charged to an employee and submitted by Principal / Department Head due to improper procedures)
- Furlough Day (FRL)

II. Request for Temporary Duty Elsewhere (TDE) (T)

Total duty hours

List date(s) of Temporary Duty Elsewhere

Justification CHAPERONE ON A FIELD TRIP

Destination PGA NATIONAL

- In-county
- Out-of-county
- Out-of-state

Provide funding information below for the following:

1. Substitute teacher required? Yes No

2. Estimated travel cost

+ + = \$0.00
 Transportation Costs Lodging costs Other (Registration) Total Estimated Travel Cost

	DEPT	FUND	FUNC	ACCOUNT	PROG	BUDG MGR	LOCAL CODE	AWARD YR	PROJECT
1.									
2.									

III. Employee Signature Approval Signatures

Signature of Person Making the Request

Date

I certify that funds are available in the accounts shown above for the specified amount(s). Area Superintendent signature required for Principal's Leave/TDE application. Out-of-state and out-of-county travel requires the approval of the Chief Officer in addition to the principal, Area Superintendent or Division Head.

Approved Disapproved

Signature of Supervisor, Principal/Division Head/Director (out-of-state/county) Date

Approved Disapproved

Signature of Area Superintendent (Principal Leave/TDE or out-of-state/county) Date

Approved Disapproved

Signature of Chief Academic Officer or Chief Operating Officer (out-of-state/county) Date