

**HIGHLAND RIM HEAD START**  
**EDUCATIONAL LEAVE REQUEST FORM**

**DATE:** \_\_\_\_\_

I \_\_\_\_\_, would like to request educational leave for the \_\_\_\_\_ term during the dates of \_\_\_\_\_ through \_\_\_\_\_.

I will need \_\_\_\_\_ hours per week. (Maximum of 7 hours). The exact hours and days that I need this leave are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Number of hours required to complete degree

Thank you,

\_\_\_\_\_ (Employee Signature)

\*You must attach your class schedule and proof of registration to verify dates\*

**OFFICE USE ONLY BELOW THIS LINE** \_\_\_\_\_

**POSITION** \_\_\_\_\_

**APPROVED** \_\_\_\_\_

**DISAPPROVED** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Approved/Disapproved by:** \_\_\_\_\_

Hire Date (seniority): \_\_\_\_\_

Performance Evaluation Score: \_\_\_\_\_

Benefit to program:

\_\_\_\_\_

Agency ability to staff position:

\_\_\_\_\_

\*The employee will receive a copy of this form\*