

# North Pekin-Marquette Heights School District No. 102

## Absence Report

Name \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Date(s) \_\_\_\_\_ Monday Tuesday Wednesday  
(Please circle) Thursday Friday

Substitute's Signature \_\_\_\_\_

1. Please complete this form when returning to duty after being absent and return it to your Principal.
2. Please be specific and explain your absence from duty.

\_\_\_\_\_ A. Illness / Family Death

\_\_\_\_\_ Doctor's Appointment \_\_\_\_\_

Pre-Approved:

Yes

No

\_\_\_\_\_ B. Personal Leave

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\_\_\_\_\_ C. Workshop / Seminar / In-Service

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\_\_\_\_\_ D. Vacation

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\_\_\_\_\_ E. Jury Duty

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\_\_\_\_\_ F. Other

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\_\_\_\_\_  
Signature of Personnel

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Superintendent

\_\_\_\_\_  
Date