



AMERICAN
SCHOOL
OF
GUATEMALA

Name: _____
 Division: _____
 Today's Date: _____
 Signature _____

REQUEST FOR LEAVE FORM
SOLICITUD DE PERMISO PARA AUSENTARSE
 (Complete and submit to your Principal / completar y entregar a su Director)

	Reason for request: _____ _____ - _____ - _____ -
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OR
 I am requesting to participate in the following professional activity/Estoy solicitando participar en la actividad de desarrollo profesional siguiente _____

This professional activity will necessitate that I be out of school on the following school days/ Esta actividad de desarrollo profesional requiere que me ausente del CAG por los siguientes días: _____

The following classes will be missed / Perderé las siguientes clases: (please specify – favor explicar)

Principal to include history of dates away from students for this academic year/ Principal incluirá historial de fechas separado de los alumnos para este ciclo escolar: _____

Not approved:
 This was not approved because:
 No fue aprobado porque:

Maximum number of teachers on leave during the same time/
 Maximo número de profesores con permiso durante el mismo día

Excessive time away from your students/Exceso de tiempo fuera de sus alumnos

Other/Otro _____

Approved:

Stipend deduction / deducción de estipendio

Accompanying CAG students/ Acompañando alumnos del CAG

Professional Development days/ Dias de desarrollo profesional

Personal urgency day (full pay)/ Urgencia Personal (pago completo)

* Leave requests must be made at least (2) two weeks before the date /La solicitud de ausencia debe realizarse al menos con (2) dos semanas antes de la fecha.

Supervisor's / Principal's signature _____
 Date _____

COPIES to:
 _____ Teacher
 _____ Principal
 _____ Coordinator
 _____ Personnel File
 _____ Human Resources