



ORANGE COUNTY DEPARTMENT OF EDUCATION

AB1522 Sick Leave REQUEST FORM SUBSTITUTE / SHORT TERM EMPLOYEE

Read instructions. Complete all sections. An incomplete form may result in the request being delayed. PRINT LEGIBLY.

YOUR ABSENCE REQUEST FORM				
SECTION 1 - EMPLOYEE INFORMATION				
Employee Name:				
Employee ID Number:		<input type="checkbox"/> Certificated	<input type="checkbox"/> Classified	
Job Title:		<input type="checkbox"/> Substitute	<input type="checkbox"/> Short Term Employee	
Site Assigned:		Frontline Job # (if applicable):		
SECTION 2 - ABSENCE INFORMATION				
	DATE(S)	START TIME	END TIME	HOURS ¹
Sick Leave – Employee:				
Sick Leave – Family:				
Reason (see details below):				
EMPLOYEE'S SIGNATURE:			DATE:	
SECTION 3 - AUTHORIZATIONS				
*Supervisor's Signature:			Date:	
<i>* A supervisor's signature is required for partial day or partial assignments.</i>				
GUIDELINES AND PROVISIONS				
<ul style="list-style-type: none">• In order to process your paid sick leave request: 1) you must submit this form to Human Resources and 2) indicate your request for sick leave on your payroll timesheet.• Your sick leave is accrued at the rate of one (1) hour per every 30 hours worked. You may use up to 40 hours or five (5) days of sick leave per year. Before submitting an absence request, ensure you have accrued sick leave available for use by viewing your accrued sick leave hours balance on the Employee Information System (EIS).• You may take paid sick leave for you or a family member for preventative care or care of an existing health condition or for specified purposes if you are a victim of domestic violence, sexual assault, or stalking. Family members include your parent, child, spouse, registered domestic partner, grandparent, grandchild, and sibling. Preventive care would include annual physicals or flu shots.• ¹For partial days, you may be required to take at least two hours of leave, but otherwise the determination of how much time is needed is left to you.• If your need is foreseeable, you must give reasonable advance notice to the worksite or supervisor, but where your need is unforeseeable you will need only to give notice as soon as practicable.				
Human Resources: (714) 966-4035		Payroll: (714) 966-4147		
HUMAN RESOURCES OFFICE USE ONLY				
Sick Leave Hours Available:	As of date:	Hours Approved:		
Human Resources Representative Signature:			Date:	