LEAVE REQUEST – FORM 138-A-ELEM LTO
ELEMENTARY LTO ABSENCES

Completed by ELEM LTO: Submit this form to your Principal for approval prior to your leave (when possible)

Surname	First Name	EIN	FTE	Absent %	☐ Full Day ☐ Part Day

Date(s) of Absence From [ ] To [ ]   MMM DD, YYYY   MMM DD, YYYY

Absence Time(s) [ ] To [ ]   HH:MM   HH:MM

#	Days Absent - enter # of days absent beside applicable reason (eg: __0.50__ DAYS – Sick Leave)	Key Codes	Replacement Information
	Days – Sick Leave/Medical Appt. (Standard medical certificate required on 6th consecutive day)	SL	☐ Field Trip
	Days – Death in Immediate Family (Indicate in drop down)	C	☐ First Duty
	Days – Death in Family, Serious Illness in Family, Personal Reasons (Indicate in drop down)	D	☐ Presence - Fifth Disease
			☐ Phys.Ed
	Days – Jury Duty/Court Leave (Attach summons as juror or witness)	F	☐ Outdoor Duty
	Days – Religious Holy Days (State recognized holy day in details below)	G	☐ Swimming
	Days – Leave Without Pay (State reason below)	IR/INR	☐ 2nd Floor, No Elevator
	Days – District Based Prof. Activity (State activity in details below) Release Code [ ]	RM/RN	
			☐ Special Activities

Details:

Employee Signature confirms leave to be used for reason selected	**Date**	**School / Site**

Completed by Principal: Signature indicates acceptance of leave request/reasons (provide a signed copy to Employee upon request)

Principal / Vice-Principal Signature	**Superintendent of Instruction Signature**	**Signature indicates Absence(s) have been entered.**

To adjust locked records, Supervisor emails completed 138 to employee.wellness@ocdsb.ca for entry. (unlocked records are prior/current week)

To verify your usage, access https://webapps2.ocdsb.ca/ipps/ and log into Employee Inquiry (same as accessing a Board computer)