***PAWNEE COMMUNITY UNIT SCHOOL DISTRICT #11***



810 North Fourth Street, Pawnee, Illinois 62558 Phone: 217-625-2471

 **Timothy R. Kratochvil**

 Superintendent

 tkratochvil@pawneeschools.org

 **Nicole Goodall W. Christopher Hennemann Ryan Steffen**

 Jr. High/High School Principal Grade School Principal Athletic Director

 ngoodall@pawneeschools.org chennemann@pawneeschools.org rsteffen@pawneeschools.org

**Absentee & Substitute Request Form**

To: Chris Hennemann**,** Principal or Date(s) of Absence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Nicole Goodall, Principal

Teacher’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level/Subject Area: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Circle day (s): **M T W R F All day**

**A.M. only (time returning)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ P.M. only (time leaving)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

If ½ day is requested, circle periods sub is needed (including homeroom):

**Monday 1A 2A 1B 2B 3A 4A 3B 4B** **HR** Prep Period \_\_\_\_\_\_\_\_

**A Day 1A 2A 3A 4A HR** Prep Period \_\_\_\_\_\_\_\_

**B Day 1B 2B 3B 4B HR** Prep Period \_\_\_\_\_\_\_\_

Reason (circle one):

 1. Sick Day

 2. Personal Day

 3. Bereavement Day

 4. Jury Duty

 5. Conference/Workshop (What /Where) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 6. Field Trip (What/Where) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 7. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Substitute Teacher requested:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Substitute Teacher hired:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Superintendent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_