

FEATHER RIVER COMMUNITY COLLEGE DISTRICT
REPORT OF ABSENCE
PERSONAL NECESSITY LEAVE
*****FULL-TIME FACULTY*****
To Be Attached to Report of Absence Form

I certify that I will be or was absent from duty for _____ hours/days
on _____ for the following reason:
(date)

In case of Personal Necessity, a member of the unit may be granted a maximum of seven (7) days leave of absence in any fiscal year without loss of pay:

_____ Emergencies related to the unit member's home in cases of natural disaster or accident.

_____ Illness or accident to the unit member's immediate family.

_____ Appointments for the purpose of conducting personal legal affairs or financial transactions that cannot be conducted outside of working hours.

_____ Receipt of summons, subpoena, or other judicial order requiring absence from work, excluding jury duty.

_____ Observance of a major religious holiday of the unit member's faith.

_____ Matters relating to present or prospective employment or parental responsibilities that cannot be scheduled outside of working hours.

_____ "Privacy Day" (up to three (3) per year.)

_____ Other reasons not previously listed or personal necessity leave required beyond seven (7) days to be approved by the Human Resources Director.

_____ Approved _____ Denied _____
Human Resources Director

I affirm that my use of leave is consistent with the criteria listed above and contained in the agreement between FRCCD and FRFT.

Signature: _____

_____ Approved _____ Denied _____
Dean of Instruction/Students