# Haywood County Schools
# Pre-arranged Absentee Form

**This form must be filled out 48 hrs prior to the date(s) you are requesting to be off to be approved.**

**Employee Name:**

| Date(s) | Sick | Personal | Vacation | Comp Time | Meeting | Location of Meeting |
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Please check ( ✓ ) reason for being absent.

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**Signature** **Date**

☐ **APPROVED** ☐ **NOT APPROVED**