

**School District of Marion  
Request To Leave Early**

Name:

Date Leave Requested:

Reason for Request:

(Request to leave early to begin a vacation or conduct business that can be conducted at another time will be denied.)

Emergency Request (Reason unable to submit two days in advance):

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit a minimum of two (2) days prior to the date requested.