

Leave of Absence Form

_____ Academic Year, _____ Elementary School, New Taipei City

新北市 _____ 區 _____ 國民小學 _____ 學年度外師請假卡

Name (名字): _____

Date YY / MM / DD 00:00 ~ 00:00 時間: 年 / 月 / 日 00:00 ~ 00:00	Reason 事由	Total Leave Time 請假日(時)數	Director Approval 主任簽章
			Principal Approval 校長簽章
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	
	<input type="checkbox"/> personal leave 事假 <input type="checkbox"/> illness 病假 <input type="checkbox"/> professional leave 公假 <input type="checkbox"/> overtime 補休 <input type="checkbox"/> others 其他: _____	_____ Days (天) _____ Hours (時)	

Total(總時數): _____ Days(天) _____ Hours(時)