

KERN VALLEY STATE PRISON FAMILY ACTIVITY LEAVE TIME OFF REQUEST

I, _____, pay# _____, am requesting to be considered
(Name of Requestor)

for time off from _____ watch on ____/____/____, at _____
(Month) (Day) (Year) (Post Description)

I am requesting to use _____ time for the hour's of _____ - _____.
(Vacation, Holiday, etc.) (Hours Requested)

Under the provisions of Family Activity Leave, I understand that I am allowed to take time off to attend family or school-related activities in which my child is participating, including, but not limited to, plays, graduations, field trips, organized sporting events, recitals, Scouts, 4-H, Junior Achievement, and Grange. I understand that subject to departmental operational needs and advance reasonable notice to the Correctional Captain, Supervisor's and employees in bargaining units that have adopted these provisions (not R06 as to date), shall be permitted to use no less than 20 hours per calendar year of accumulated leave credits to attend family or school-related activities. I further understand that I must provide written documentation supporting the requested activity on the specified date and time.

Note: Sick leave credits may not be used. Use of this leave shall not diminish the 40 hour leave entitlement provided under the Family School Partnership Act

Name of child _____ Relationship _____

Activity _____ Date and time _____

Signature Date

APPROVED / DISAPPROVED

Correctional Captain Date
Central Operations

Comments: _____

Original: Watch Office
cc: Correctional Captain-Central Operations
Employee