

NEW HAMPSHIRE PUBLIC SCHOOLS
SCHOOL ADMINISTRATIVE UNIT #1

CONTOOCCOOK VALLEY SCHOOL DISTRICT
OFFICE OF THE SUPERINTENDENT OF SCHOOLS
106 Hancock Road, Peterborough, NH, 03458-1197

Telephone: 603-924-3336

Fax: 603-924-6707

Human Resources Department
924-3336 Ext. 2033

SICK DAY BANK(SDB) – APPLICATION

Date of Application _____ Date Received _____

(HR Use Only)

Name(Print) _____ Location _____

of Days Requested _____ Dates of Leave _____

Note: You must have exhausted all of your sick/personal days before using days from the Sick Day Bank. The maximum number of days that may be granted is thirty (30) days. Days can only be requested for your serious personal illness, non-work related injury, or other disability. You may attach a doctor's note confirming the need for your absence. If you do not submit a doctor's note, the SDB Committee may request one.

Reason for Request _____

Signature of Employee _____

Submit to Human Resources, SAU Office

For Sick Day Bank Committee Use Only

Request Approved _____ Yes _____ No _____ Date _____

Number of Days Approved _____ Effective Dates _____

Comments _____

Sick Day Bank Committee

CVEA Representative

Administration

School Board Representative (Required only for tie breaker)

HR 7.18.19

