

**PARENT-TEACHER CONFERENCE REQUEST FORM
(Civil Service)**

In accordance with the Governor's Administrative Directive No. 93-02 dated December 30, 1993, I request "Administrative Leave" not to exceed two (2) hours (normal travel time included) to attend the scheduled parent-teacher conference. I understand that any excess time will be charged to vacation or other appropriate leaves of absence.

Employee's Name: _____

Position Title: _____ SR/WB: _____

Organization: _____
(College/Institute/Department or Section)

FTE: _____% (Hourly paid employees are not eligible for administrative leave)

Employee's Signature Date

Recommend/Do Not Recommend:

Immediate Supervisor's Signature Date

Approve/Disapprove:

Authorized Designated Representative Date

Date of Parent-Teacher Conference: _____ Time: _____

School: _____ Student's Grade Level: _____

Employee's Relationship to Student: _____

Confirmation of Attendance:

Teacher's Name (Please type or print) _____

Teacher's Signature Date

Note: Please attach written documentation of the scheduled parent-teacher conference. Please return the completed form to your designated personnel representative.