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Weslaco Independent School District

Human Resources Department

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WESLACO INDEPENDENT SCHOOL DISTRICT
THE RIGHT CHOICE

*Dr. Priscilla Canales
Superintendent of Schools*

2019-2020

STAFF MEMBER REQUEST

FOR LEAVING CENTRAL OFFICE, CAMPUS & DEPARTMENTS EARLY

I need to leave on: _____ at _____
[DATE] [TIME]

REASON FOR REQUEST

Dr. Appt. School Emergency Other (please specify)

For the Purpose: _____

Signature of Staff Member: _____

Campus/Department: _____

Approved: YES
 NO

BY: _____
[Principal/Administrator]

DATE: _____

Leave of Absence Categories:

- Personal Leave – State (PLS)
- Personal Business (PB)
- Compensatory Time
- Documentation Supporting Leave is Attached