

MERCER COUNTY SCHOOL DISTRICT #404

JURY DUTY

Please attach a copy of Jury Duty notice.

STAFF NAME _____

TODAY'S DATE _____

DATE(S) OF LEAVE _____

FULL OR PARTIAL DAY _____

(partial day = quarter day breakdown (.75, .5 or .25 of a day – list exact hours requesting)

REASON

❖ *Any checks paid to the employee from the courts, with the exception of mileage, should be signed over to the School District so regular pay from the school can still be received.*

(Signature of person making request)

(Signature of Principal)

Signature of person who notifies sub caller

Date