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HUMAN RESOURCES
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EMPLOYEE TRAUMA LEAVE REQUEST

It is hereby requested that the district grant a trauma leave of absence without loss of pay of up to three (3) school days listed below for a recent Natural Disaster:

3 Days: (List Dates) _____

IMPORTANT NOTE (1): Trauma Leave Requests must be turned into HR within thirty (30) calendar days of the Natural Disaster. Any request received past thirty (30) calendars days of the Natural Disaster –will be automatically denied.

IMPORTANT NOTE (2): Trauma Leave shall be taken within ten (10) calendar days of the Nature Disaster, except under extraordinary circumstances which shall be fully detailed. Documentation such as an Insurance claims, FEMA paperwork, etc. must accompany this request.

Employee Name:	Employee ID:
School/Work Site:	Position:
Date of Natural Disaster:	
Location of Disaster (Including City, State):	

Employee Signature:	Date:
Principal/Supervisor Signature:	Date:
Approved Dates:	
Notes:	
Human Resources Signature:	Date: