USE OF ASSOCIATION DAYS

TIEA Employees

To: S	Superintendent			
I here	eby request a TOTAL of Association days have been used	_ Association d I to date. The f	ays be grant following As	ed for the school year. ssociation date(s) are being requested:
NAMES -		DATES	_	NUMBER DAYS -
 Signa	ature of Association President		Date	
The 12.8	reasons: (5) Up to six (6) days per year for use Association. Use of such days shad (a) Designated by the Associate emergency conditions preclated (b) Not more than three (3) teans section.	ble against the to by officers or all be: ion President to lude such notice chers shall be r	eacher's allo agents of the o the Superir e. eleased on a	· ·
	The above requested Association The above requested Association			following reasons:
Signa	ature of Superintendent		Date	