CODO	Teachei	r Professiona	al Leave Re	quest	
Clear Form		Frederick County 191 South Ea Frederick, Mar	ast Street		Form #003-F22 February 2025
This form is	for teachers to use wher Article XXVII G, of	n requesting Profess the negotiated agre	-		ce under
NOTE: Adjus	tments cannot apply bey	yond two pay perio payroll pe	-	orm must be submitted	l for each
Date Submitted:	First Name: Last Name:				
Work Location:		Position:		Employee ID:	
Name/Title of Activity	:				
Activity Description:					
Antivity Datase					
Activity Dates:		Number of Days I	Requested:		
How will activity benef	it students?				
How will learning be sh	nared with staff?				
Requestor signature:			Date:		
Approved: Yes	No, Denied				
Curriculum Specialist S	ignature:				
			Date:		
Principal Signature:			Date:		
Reason for Denial:	Activity not suported				
	Other(explain)	vailable (If denied fo	or insufficient days	, you may request perso	onal leave)
	other(explain)				
Review of denial for ins	ufficient days:				
Director Signature:			Date:		