



FOR TEACHERS ONLY

Request for **Earned Days Off** to be moved to PD account or for payout if you are leaving during the school year.

To be faxed with Principal's Month End Report to the Payroll Department at the Meadow Lake Office.

Name: _____ School: _____

_____ Total EDO days remaining as of _____
(date)

- _____ Days transferred to Personal PD Account at sub teacher rate

- _____ No. of days requested for payout at sub teacher rate

= _____ Days carried forward to next academic year (if on permanent contract and taking a leave of absence from current school year)

Date: _____ Teacher's Signature: _____

Date: _____ Principal's Signature: _____

Note: You may carry a maximum of 2 **YOUR** days to the next academic year.
(for example: 50% fte - maximum to carry to next academic year is 1.0 day)
September 2018 to June 2019: sub teacher rate = \$260.00 per day