

# NORWALK PUBLIC SCHOOLS

**Administrator's Request for  
Visiting/Professional Day  
Vacation or Personal Day**

**All requests are to be sent to the Director/Supervisor's Office for action**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
School or Dept.: \_\_\_\_\_

**Visiting or Professional Day**

One week's notice is requested unless there are extenuating circumstances.

I wish to visit/attend: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

The benefits to **Norwalk Public Schools** will be: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please attach relevant information as necessary*

**Approval**

Request approved: \_\_\_\_\_ Date \_\_\_\_\_  
Appropriate Director/Supervisor

**Vacation and/or Personal Day(s)**

Vacation Day(s) \_\_\_\_\_ Personal Day(s) \_\_\_\_\_

Dates Requested: from \_\_\_\_\_ to \_\_\_\_\_

Name of person who will be in charge \_\_\_\_\_

If calls are to be routed, who will receive them \_\_\_\_\_

Administrator's Signature \_\_\_\_\_

**Approval**

Request approved: \_\_\_\_\_ Date \_\_\_\_\_  
Appropriate Director/Supervisor