Date (Month-Day-Year)

Recipient

Human Resources Department

Address of your school board

Notice of part-time leave without salary to extend a maternity, paternity or adoption leave to complete the school year in progress (option d)

Dear Sir or Madam:

In conformity with clause 5-13.66, please consider this as a notice of leave according to clause 5-13.60 d), which will be an extension of my maternity, paternity or adoption leave from \_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

During this extension of my leave, and until the end of the work year in progress, I choose not to work (or to work).

I also wish to continue to participate in the insurance plans for which I am eligible and to pay the full cost of premiums in conformity with clause 5-13.69.

Best regards,

Signature

Name

Address

c. c. : Local Union