

**THE NEW YORK CITY DEPARTMENT OF EDUCATION  
DIVISION OF HUMAN RESOURCES AND TALENT  
65 Court Street, Brooklyn, NY 11201**

**OP 201: APPLICATION FOR EXCUSE OF ABSENCE WITHOUT PAY AND/OR AS NON-ATTENDANCE**

Community District Instructional Staff     City District Instructional Staff

**SECTION I: TO BE COMPLETED BY SCHOOL SECRETARY OR APPLICANT**

Applicant's Full Name <input style="width:90%;" type="text"/>	School Name <input style="width:90%;" type="text"/>
Home Address <input style="width:90%;" type="text"/>	School Address <input style="width:90%;" type="text"/>
City <input style="width:20%;" type="text"/> State <input style="width:10%;" type="text"/> Zip <input style="width:20%;" type="text"/>	City <input style="width:40%;" type="text"/> State <input style="width:10%;" type="text"/> Zip <input style="width:20%;" type="text"/>

File# <input style="width:90%;" type="text"/>	Social Security Number <input style="width:15%;" type="text"/> <input style="width:15%;" type="text"/> <input style="width:15%;" type="text"/>	School District # <input style="width:90%;" type="text"/>
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License <input style="width:90%;" type="text"/>	Years of Service <input style="width:90%;" type="text"/>
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Regularly Appointed     Regular Substitute    N.B. Not used for per diem substitutes

**Days Absent: Use "N" for days of non-attendance and "A" for days excused without pay.**  
**Writethename of month. Show school days of absence only. Use correct code to show type of absence.**

Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Days <input style="width:90%;" type="text"/>	Hours <input style="width:90%;" type="text"/>	Minutes <input style="width:90%;" type="text"/>	OF NON-ATTENDANCE REQUESTED FOR PURPOSE CHECKED BELOW:
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- |   |  |
|---|--|
| <input type="checkbox"/> A - Appearance for Jury Qualification<br><input type="checkbox"/> B - Appearance for Jury Duty<br><input type="checkbox"/> C - Appearance on Official Business<br><input type="checkbox"/> D - Appearance as Disinterested Witness<br><input type="checkbox"/> E - Death in Immediate Family or Household<br><input type="checkbox"/> F - Death of Relative Outside Immediate Family or Household<br><input type="checkbox"/> G - Funeral of an Associate<br><input type="checkbox"/> H - Degree or Graduation | <input type="checkbox"/> I - Extraordinary Transportation Delay<br><input type="checkbox"/> J - Legislative Hearing<br><input type="checkbox"/> K - Ordered Military Duty<br><input type="checkbox"/> L - Quarantine<br><input type="checkbox"/> M - Religious Observance<br><input type="checkbox"/> N - Requirement of the School System<br><input type="checkbox"/> O - School Visits and Meetings Within New York City<br><p align="right"><small>N.B. School meeting or convention outside New York City requires application on special application form (OP 221).</small></p> |
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Days <input style="width:90%;" type="text"/>	Hours <input style="width:90%;" type="text"/>	Minutes <input style="width:90%;" type="text"/>	OF ABSENCE EXCUSED WITHOUT PAY FOR PURPOSE CHECKED BELOW:
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|---|---|
| <input type="checkbox"/> AA - Interested Court Appearance<br><input type="checkbox"/> BB - Death in Family<br><input type="checkbox"/> CC - Funeral of Person Not in Family | <input type="checkbox"/> DD - Illness in Family<br><input type="checkbox"/> EE - Personal Business<br><p align="right"><small>N.B. Personal Business excused with pay on self-certification requires application on sick leave application form (OP 198).</small></p> |
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**Comment or Explanation:** (Give name and relationship of persons ill or deceased, graduating or receiving degree, nature of subpoena or notice or other directive requiring appearance, name of schools or activities visited, sponsoring organization, date and place of meeting or convention, or extent and type of military duty. Copies of orders, directives, notices, subpoenas or like evidence when attached should be noted as enclosures.)

**SECTION II: TO BE COMPLETED BY APPLICANT:**

I hereby apply for excuse of absence without pay and/or as non-attendance as indicated in Section I above for the period and purpose stated and certify that the information shown in connection with this application is complete and accurate.

Signature of Applicant \_\_\_\_\_ Title  Date

**SECTION III: TO BE COMPLETED BY PRINCIPAL (IF OTHER APPROPRIATE SUPERVISOR, SHOW TITLE BELOW):**

Approved     Disapproved    for reason(s) indicated:

Signature of Principal / Supervisor \_\_\_\_\_ Title  Date

**SECTION IV: TO BE COMPLETED BY COMMUNITY SUPERINTENDENT (OR FOR CITY DISTRICT STAFF, BY RESPONSIBLE ASSISTANT SUPERINTENDENT):**

Approved     Disapproved    for reason(s) indicated:

Authorized Signature \_\_\_\_\_ Title  Date

## GENERAL RULES AND INSTRUCTIONS

Absence may be excused without pay and/or as non-attendance by entry and countersignature on Form OP 104 (replaces SR 4) without use of application form (OP 201) except as directed by the principal in cases where this is not possible or when approval of a superintendent is required. Whenever used, Form OP 201 must show entire period covered by absence and/or non-attendance.

### Special Rules Governing Non-Attendance

Non-attendance is not considered absence for purposes of rating. Except as otherwise noted, is granted by the principal and a substitute may be engaged for each full day of such absence.

A – Appearance for Jury Qualification: Up to 3 hours but only when notice requires appearance during school hours. Substitute not authorized. Time to be arranged with principal in advance.

B – Appearance for Jury Duty: Board of Education must be paid compensation received for jury duty.

C – Appearance on Official Business: Before court, public board, commission or officer on business of Community Board or City Board of Education.

D – Appearance as Disinterested Witness: Before court, public board, commission or officer in case where neither employee nor anyone related to the employee in any way has a financial or personal interest either directly or indirectly and where the employee's attendance is not required as a result of any employment, occupation or voluntary act by the employee.

E – Death in Immediate Family or Household: Day of death and up to 3 calendar days immediately following death of parent, child, brother, sister, grandparent, grandchild, spouse, parent of spouse or any relative or step-relative residing in staff member's personal household. Time required exceeding this allowance (e.g., travel to funeral at a remote place) requires application on Form OP 201 and approval by responsible superintendent.

F – Death of Relative Outside Immediate Family or Household: Up to 1 day for funeral of brother-in-law, sister-in-law, son-in-law, daughter-in-law, nephew, niece, uncle or aunt not residing in employee's personal household.

G – Funeral of an Associate: Up to 1 day for funeral.

H – Degree or Graduation: Day of exercises marking award of diploma or degree by recognized school or institution of higher learning to employee, employee's parent, spouse, child or step-child. Excluded are ceremonies, however designated, such as "graduation" from nursery school or kindergarten or related to incidental or supplementary instruction such as released time. Up to 2 additional days so as not to exceed 3 consecutive calendar days when necessary to attend exercises at a remote place require application on Form OP 201 and approval by the responsible superintendent.

I – Extraordinary Transportation Delay: Up to 3 hours by the principal. Additional time up to 2 consecutive school days requires application on Form OP 201 and approval by the responsible superintendent except when covered by a blanket directive.

J – Legislative Hearing: Only with express permission obtained in advance from the Community Superintendent (or, for City District staff, from the Office of Personnel acting for the Chancellor) may any employee testify before a legislative hearing or similar inquiry concerning school matters. Requires application on Form OP 201 and approval by the Community Superintendent (or, for City District staff, by the responsible Assistant Superintendent).

K – Ordered Military Duty: Up to 30 calendar days in each school year for reserve duty of regularly appointed personnel; for regular substitute ordered to reserve duty during fall term, may not exceed period through January 31 or, when ordered to duty during the spring term, may not exceed period through close of school in June (since regular substitutes are considered employed by the term only). Time required for selective service examination (but not for entry into service other than as reservist) is granted as non-attendance.

L – Quarantine: For inclusive period shown on quarantine certificate.

M – Religious Observance: Subject to deduction approximating one day's pay for each day granted.

N – Requirement of the School System: As officially ordered to meet a requirement of the Community District, City Board of Education or Board of Examiners (whether as an assistant or candidate).

O – School Visits and Meetings Within New York City: Substitutes engaged only within U.F.T. agreement limit of an average of four teachers per school year in each school and not to cover supervisors covered by C.S.A. agreement which limits supervisors to four day per school year.

#### Special Rules for Governing Absence Excused Without Pay (Other than for Personal Illness)

Absence without pay (other than for personal illness applied for on Form OP 198) is excused by the principal up to 2 consecutive school days; additional time not to exceed one calendar month requires application on Form OP 201 and approval by the responsible superintendent. (Time exceeding one calendar month requires application for and acceptance of the proper leave of absence.) A substitute may be engaged for each full day of absence excused without pay.

AA – Interested Court Appearance: When not appropriate for non-attendance (see Item D above).

BB – Death in Family: When not appropriate for non-attendance (see Item E and Item F above) or in addition to non-attendance granted.

CC – Funeral of Person Not in Family: When not appropriate for non-attendance (see Item G above).

DD – Illness in Family.

EE – Personal Business: When not available on self-certification by application (on Form OP 198) for sick leave.