

STEPHANIE D. RODRIGUE, SUPERINTENDENT

MARVIN TRAHAN, PRESIDENT

DOROTHY THERIOT, VICE PRESIDENT

CAMERON PARISH SCHOOL BOARD

P.O. BOX 1548
CAMERON, LOUISIANA 70631
PHONE 337-775-5784
FAX 337-775-5097

DISTRICT 1. MARSHA TRAHAN
DISTRICT 2. DWAYNE SANNER
DISTRICT 3. SCOTT NUNEZ

DISTRICT 4. DOROTHY THERIOT
DISTRICT 5. LOSTON MCEVERS
DISTRICT 6. MARVIN TRAHAN

DISTRICT 7. KAREN NUNEZ

Date: _____

Stephanie D. Rodrigue, Superintendent
Cameron Parish School Board
510 Marshall Street
Cameron, LA 70631

Dear Mrs. Rodrigue:

Please consider the following:

- Request for payment – 25 days accumulated sick leave.**
(Upon entering drop or retirement)
- Sabbatical Leave** (Application attached)
- Professional and Cultural Improvement Leave** (Application attached)
- Extended Sick Leave** (Medical Documentation attached)
- Leave without Pay** (Application attached)
- Resignation** (Form attached)

Your prompt attention in the above request/s would be greatly appreciated.

Sincerely,

Employee's Name

Date

Social Security Number

Submit Original Form to Superintendent