



School District No. 73 (Kamloops/Thompson)

# NOTIFICATION OF RETURN FROM FULL TIME LEAVE

1383 9<sup>th</sup> Avenue

Kamloops, B.C.

V2C 3X7

Last Name:	First Name/Initials:	Home Telephone:
School:		Continuing FTE
<input type="checkbox"/> I intend to return to my position in September 2016		
<input type="checkbox"/> I intend to extend my leave (if so, please complete the attached Application for Long-Term Leave)		
<b>Please return by April 15, 2016 to Human Resources by fax, mail or scan to email to <a href="mailto:edservices@sd73.bc.ca">edservices@sd73.bc.ca</a></b>		
Signature of Applicant: _____		Date: _____