	Employee's Name:
	Employee's Name:
	Job Title:
	Employee ID #:
	Site/School:
	Date:
	(Check One)
	Education Support Professional
	 Professional Technical
	Administration
Please	e check the appropriate box below, sign the form, and return this form to your visor.
	Please <i>consider</i> me for employment for the 20 – 20 school year.
	Please <i>do not consider</i> me for employment for the 20 – 20 school year because I plan to resign or retire.
	I wish to apply for extended leave for the 20 – 20 school year. My "Application for Leave" is attached.
	Employee's Signature:

Form No.: PER-2425-005 – Intent Form (ESP/PT/Admin) / HR / Intent Forms

New Date: 1/21/25