Name _____ Date_____

Day(s) Requested off _____

Reason for Request _____

Indicate the student and the instructor(s) that will substitute during your absence:

Name	**Course**	**Lesson**	**Substitute Instructor**
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

☐ I certify the substitute instructors have confirmed their availability.

☐ I certify that all students have been properly handled and that my schedule is free for the requested days

off. (Update AIMS)

_____ _____
Flight Instructor   Date

_____ _____
Supervisor   Date