

June 20, 2011

I, Debbie Powers, respectfully ask the Gallatin County Board of Education for approval of a 6 month medical leave beginning July 1, 2011. I wish to use my use my sick days for this time period. I understand the other time will be unpaid leave.

It is with great difficulty I make this request, the tragic loss of my daughter Samantha has been so hard and I have tried so hard to put my life back to some degree but I feel it essential for me to take some time away to help me deal with the depression.

Thank you.

Debbie Powers



Douglas Goderwis, M.D.

Ky Lic. No.: 27947 DEA No.: BG2555499

7370 Turfway Road, Suite 100 • Florence, KY 41042
Phone (859) 212-4700

Name Debbie Powers
Address _____ Date 6/17/11

R Due to Post-traumatic Stress disorder
& Depression
I have Recommended Debbie
to take a medical leave of
Absence until further notice.

- ☐ 1-24
☐ 25-49
☐ 50-74
☐ 75-100
☐ 101-150
☐ 151 and over

Refill NR 1 2 3 4 5

Douglas Goderwis, M.D.
Prescription is void if more than one (1) prescription is written per blank