



Academic Affairs Personnel LEAVE REQUEST FORM

Incomplete forms will be returned without action. Please submit request at least 5 days before departure date, except for unanticipated sick leave or emergency.

Employee Name: \_\_\_\_\_

Request Date(s): \_\_\_\_\_

Title(s)/Position(s): \_\_\_\_\_

Department: \_\_\_\_\_

I respectfully request permission to be absent from the University from:

From: \_\_\_\_\_

To: \_\_\_\_\_

#of Days: \_\_\_\_\_

# of Hours: \_\_\_\_\_

Type of Leave:

(Choose which is applicable: Annual Administrative Paid Sick Jury Military

Personal Professional Meeting/Assignment or Business)

Purpose of Leave (except for personal): \_\_\_\_\_

(If professional leave, documentation must accompany the leave form)

Destination (except for personal): \_\_\_\_\_

University funds requested Yes  No  If Yes, how much? \$ \_\_\_\_\_

Name of Account funds requested from: \_\_\_\_\_ Account#: \_\_\_\_\_

Requesting use of University Vehicle: Yes  No  Vehicle Type: Car  Van  Shuttle

During my absence my duties will be performed as follows: (use back of form for additional information as needed)

<b>Academic Responsibilities</b> will be performed by:	Printed Name: _____	Signature of person accepting responsibility: _____
<b>Administrative Responsibilities</b> (if applicable) performed by: (This individual signs on my behalf)	Printed Name: _____	Signature of person accepting responsibility: _____

Employee:	Date:	Signature:
Director (if applicable):	Date:	Signature:
Department Chair:	Date:	Signature:
Dean:	Date:	Signature:
Grant Accountant:	Date:	Signature:
Vice President for Academic Affairs: (Necessary for Personnel reporting Directly to the V.P.)	Date:	Signature:
Office of Administrative Affairs Designee: (If requesting a vehicle)	Date:	Signature:
(For International Travel Only): Must be routed through the Vice President for Academic Affairs before being forwarded to the Office of the President.		Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No
President:	Date:	Signature:

Additional Information (if applicable):