



# Employee Leave Request

Name: \_\_\_\_\_ Date Request made: \_\_\_\_\_

Type of Request:  Medical  Annual  Jury  Bereavement  Attend Class  Other

Leave Begins		Leave Ends		Day(s)	Hour(s)	TOTAL HRs
Date	Time	Date	Time			

I will return to work on \_\_\_\_\_ day, at \_\_\_\_\_ am \_\_\_ pm.

What committee meetings, tasks or projects are affected by this absence?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If applicable, I have verified that \_\_\_\_\_ will be here during this leave to perform as my "back up" for critical functions such as, \_\_\_\_\_.

**\*I understand that time away from work is subject to supervisor approval and University policies.**

**\*I further understand that if I do not have leave time accrued, I will not be paid for the absence.**

**\*I am aware that the official record of this absence is to be recorded on my corresponding timesheet.**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments, if denied: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HR Added Leave Request to Staff calendar: \_\_\_\_\_ with 2 weeks advance notice? Yes No

If Exempt – date supervisor approved electronic submission \_\_\_\_\_