

Leave of Absence Request

Step 1. Employee complete and forward to HR

REMINDER: When completing form, do not list any confidential information.

Employee's Name _____	Date of Request _____
Requested Begin Date _____	Requested End Date _____
Employee's Signature _____	Reason for Request _____
Step 1 Completed By (if other than employee) _____	Other* _____

Step 2. Human Resources complete and forward to Supervisor / Manager

Type of Leave _____	Type of Leave Requested _____
Leave Balances Confirmed _____	Total Paid Leave _____ Total Unpaid Leave _____
Appropriate Documentation Received _____	Comments:
Human Resources Signature _____	

Step 3. Supervisor / Manager complete and forward to Dean / Director

How will responsibilities be covered? (Brief description)	
Supervisor / Manager Signature _____	Comments

Step 4. Dean / Director complete and return to Director of HR

Dean / Director Signature _____	
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FINAL APPROVALS / ACKNOWLEDGEMENT

Human Resources Director (OOP Vice President - HR) Signature _____	Comments:
Vice President / Campus Director Signature ((OOP President) _____	Comments: