

Academic Personnel Request for Leave of Absence (Business Leave)

Faculty and Academic Professionals

Requests for leave will be considered and granted at the discretion of the unit and the approval by the provost of the university or designee.

Employee Name:		ASU ID:	Date: (mm/dd/yyyy)	
College:		Unit:	(ппписалуууу)	
Hire Date:	Rank:			
,	ld/yyyy)			
Dates of previous Lea	aves of Absence Granted	(MM/DD/YYYY – MM/DD/YYYY)		
I am requesting a	a new Business Leave I a	I am requesting an extension to a previous Business Leave		
	for Leave of Absence: (State clearly and co			
benefits to ASU, writing an	d publications planned, and other pertinent informati	ion. If applicable, include reason for l	eave to count towards years of service.)	
Requested Period:	Academic Year	∩R Fiscal Year		
Requested Period.	Academic Teal	OR Fiscal Year		
I am requesting le	eave beginning on	and anticipated end date		
(mm/dd/yyyy) (mm/dd/yyyy) Compensation during leave:				
Explain compensation	on option:			
I understand that this will <u>not</u> count toward my years of service. Requesting approval to count towards years of service.				
Leave of Absence does <u>not</u> count toward years of service for sabbatical leave To request an extension of the probationary period <u>see process guide</u>				
I agree to abide by the policies governing Leaves of Absence as set forth in the academic Affairs Policies and Procedures manual.				
Employee Signatu	ure	Date	(mm/dd/yyyy)	
	Official Us	e Only		
	Printed Name	Signature	Approve Deny	
Unit Chair/Director:	Timed Name	oignata.o	Date:	
College Dean:			Date:	
University Provost: (or designee)			Date:	
	Leave of Absence counts towards years of service	vice. Leave of Absence does not count towards years of service.		
Notes				