

UNIVERSITY OF HOUSTON
Request for Leave of Absence Form

| | | |
|---|------------------------|-------------|
| Name: | Empl ID: | Position #: |
| Department: | College: | |
| Rank/Title: | Annual Salary: | FTE: |
| Tenured: <input type="checkbox"/> yes <input type="checkbox"/> no | Years in Current Rank: | |

DESCRIPTION OF LEAVE

Type of Leave Requested: Development Unpaid Leave FMLA

Leave Dates: From: _____ To: _____

Duration of Leave(# of semesters): _____ Pay Status: With Pay Without Pay Half Pay

Purpose of Leave (Be specific – Attach additional sheet if necessary):

Normal Course Load:

How Courses Will Be Covered:

For Tenure Track Positions

Please indicate the anticipated year of mandatory review for: _____ Third Year _____ Sixth Year

PREVIOUS LEAVES

| Type of Leave | Dates | | Paid / Unpaid |
|---------------|-------|-----|---------------|
| | From: | To: | |

APPROVALS

| | | | |
|----------------|------|---|------|
| Faculty Member | Date | Department Chair | Date |
| Dean | Date | Senior Vice President for Academic Affairs and Provost | Date |