

FY \_\_\_\_\_

### Leave of Absence Request Form - Faculty

**IMPORTANT:** Requests for a leave or extension of leave of one semester or more must be processed not later than 30 days from receipt of the request.

**PART I (To be completed by the applicant)**

Name \_\_\_\_\_ Employee I.D. No. \_\_\_\_\_  
 College/Division \_\_\_\_\_ Department/Unit \_\_\_\_\_  
 Department/Unit Account No. \_\_\_\_\_ Initial date of employment: \_\_\_\_\_  
 Current rank \_\_\_\_\_ Effective date of rank \_\_\_\_\_  
 Current salary: 9 mo. \_\_\_\_\_ 12 mo. \_\_\_\_\_  
 FTE: \_\_\_\_\_ Mail point: \_\_\_\_\_

Campus (check one):     Tampa                       St. Petersburg                       Sarasota-Manatee

Check status:             Tenured (tenure date: \_\_\_\_\_)  
                                   Untenured & tenure-earning  
                                   Non-tenure-earning

Dates of requested leave:      From \_\_\_\_\_ Through \_\_\_\_\_

Current leave balance:                      Annual leave \_\_\_\_\_ Sick leave \_\_\_\_\_

Leave type:                       With pay ( \_\_\_\_\_ hours AL; \_\_\_\_\_ hours SL)  
     Without pay  
     Intermittent leave ( \_\_\_\_\_ hours AL; \_\_\_\_\_ hours SL per pay period)  
     Reduced work assignment (explain: \_\_\_\_\_)

FTE: \_\_\_\_\_

List chronologically previous leaves from USF (with pay or without pay) and purpose:

Purpose of requested leave:    Personal     Medical     Professional/Academic  
 Explain:

Leaves of absence requested and granted for professional/academic reasons are considered equivalent to assigned duties. It is the responsibility of the applicant, by agreement with the department/unit chair or director, to provide data for evaluation of performance consistent with the purpose of the leave.

Does this absence qualify as a serious health condition under the Family and Medical Leave Act (FMLA)? If you are not sure of the answer, check the [Human Resources Attendance & Leave Website](#) for FMLA general information.

Yes    No

If “yes,” please complete and attach the *FMLA Certification Form* and the *Certification of Health Care Provider and Serious Health Condition Definitions*, both found on the site listed above.

If the basis of this leave qualifies as a serious health condition under the FMLA, the University intends to track this absence as a part of your FMLA entitlement.

SIGNATURE OF APPLICANT \_\_\_\_\_

Forwarding Address:

**PART II (To be completed by applicant’s department/unit chair or director)**

1. If the leave is for professional/academic purposes, please provide or, attach, a brief statement regarding the value of the requested leave to (a) the professional/academic development of the applicant; and (b) the department/unit, college, and university.

2. If this leave is granted to a tenure-earning but non-tenured faculty member, will the leave period count as part of time earned toward tenure? (Refer to UFF CBA, Article 17.4)

Yes     No

3. With tenure clock extension, semester/year materials will be submitted: \_\_\_\_\_

4. Faculty member will notify USF of intent to return by (date): \_\_\_\_\_

**PART III (To be completed by college/division or campus dean):**

Please provide, or attach, the basis of the approval/denial of this leave:

**PART IV (Signatures)**

**Department/Unit Chair or Director:** \_\_\_\_\_

Approve     Disapprove    Date \_\_\_\_\_

**IMPORTANT:** It is the responsibility of the chair/director to notify the employee within two business days of receipt of the request by the university that the leave time will be counted as part of the employee's Family & Medical Leave Act (FMLA) entitlement.

**Dean:** \_\_\_\_\_

Approve     Disapprove    Date \_\_\_\_\_

**Provost or Vice President for Health Sciences:** \_\_\_\_\_

Approve     Disapprove    Date \_\_\_\_\_

**Send this completed form to:**

**Office of the Provost and Executive Vice President**

Attention: Brooke Deen

bdeen@usf.edu

For questions or assistance: (813) 974-5649

**USF Health Faculty and Academic Affairs**

Attention: Olga Joanow

ojoanow@usf.edu

For questions or assistance: (813) 974-1352