

UCA ACADEMIC AFFAIRS
Leave Request Form: 12-Month Employees

Employee

Employee's name UCA ID #

Department

Leave Details

Leave Dates		Hours Used	Type of Leave *			
Start date	End date		VL	SL	CT	CE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Type of Leave legend: VL = Vacation, SL = Sick Leave, CT = Comp Time, CE = Children's Education (eight [8] hours maximum per year). Indicate only one type of leave for each entry.

Additional explanation if needed:

Signatures

SIGNATURE OF EMPLOYEE	DATE
SIGNATURE OF SUPERVISOR	DATE
SIGNATURE OF DEAN/ASSOCIATE PROVOST/PROVOST	DATE

All 12-month employees (administrators, non-classified staff, classified staff, 12-month faculty) must complete this form for each type of leave. Leave requests and leave reports are subject to audit; a copy of the completed form must be retained by the department head, dean, or provost, depending on the employee's reporting level.