



## Faculty/Staff Leave Request Form

Name: \_\_\_\_\_ Datatel ID #: \_\_\_\_\_  
Department: \_\_\_\_\_

Leave Requested: Check One

- Vacation       Sick       Jury Duty       Military Duty       Comp Time
- Personal Leave (Faculty only)       Other: \_\_\_\_\_ (Specify)

Dates Requested: From: \_\_\_\_\_, 200\_ To: \_\_\_\_\_, 200\_ Total hours requested: \_\_\_\_\_  
Time Requested: From: \_\_\_\_\_  a.m.  p.m. To: \_\_\_\_\_  a.m.  p.m.

### For Faculty Use Only

(Substitution Salary: \$16.75 for a one-academic hour lecture, \$12.56 for one-academic hour of lab.)

Substitute Instructor: \_\_\_\_\_ Sub Instructor Signature: \_\_\_\_\_  
\_\_\_\_\_  
(Subject-Course No.-Section) (Time of Day) (Day of Week) \$ (Substitute Pay Amount)

Substitute Instructor: \_\_\_\_\_ Sub Instructor Signature: \_\_\_\_\_  
\_\_\_\_\_  
(Subject-Course No.-Section) (Time of Day) (Day of Week) \$ (Substitute Pay Amount)

Substitute Instructor: \_\_\_\_\_ Sub Instructor Signature: \_\_\_\_\_  
\_\_\_\_\_  
(Subject-Course No.-Section) (Time of Day) (Day of Week) \$ (Substitute Pay Amount)

### For Supervisor Use Only

Approved       Not Approved      Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

### Human Resources Use Only

Leave Hours Requested \_\_\_\_\_ Leave Hours Available \_\_\_\_\_ Leave Hours Changed to Leave Without Pay \_\_\_\_\_

*I certify that, to the best of my knowledge, I have the balance available to request this leave.*

\_\_\_\_\_  
Employee's signature

\_\_\_\_\_  
Date

Calculated as \$16.75 per academic lecture hours and \$12.56 per academic hour lab:

<b><u>Actual Hour</u></b>	<b><u>Academic Hour</u></b>	<b><u>Lecture Pay</u></b>	<b><u>Lab Pay</u></b>
50 min	1 hour	\$16.75	\$12.56
1 hour 15 min	1.5 hours	\$25.13	\$18.84
1 hour 40 min	2 hours	\$33.50	\$25.12
2 hours	2.4 hours	\$40.20	\$30.14
2 hours 30 min	3 hours	\$50.25	\$37.68

(Calculations have been rounded.)