

FACULTY LEAVE OF ABSENCE REQUEST FORM

Name:	Employee	ID:	Institute Hire Date:
Title:	Current S	alary:	Position #:
College/School/Department Name:			ployee Type:
Effective Date/Period of Leave Requested: to			e of Leave:
Location While on Leave:		Cor	ntinue Benefits? Yes No
Purpose of Leave:			
How will teaching and/or adminis	strative duties be handled?		
Is the employee PI on any spons If so, has the absence been clea	sored funds?	□ No	
If the request is for educational leave, it is recommended that the leave be granted as a (check one of the three choices):	 □ Leave without pay □ Leave with pay in the amount of \$ □ Partial leave with a% commitment to Georgia Tech and a salary of \$ 		
Pay will be divided as follows:	☐ State funds: \$	_ □ Federal funds: \$	Other: \$
Previous leaves taken:			
Begin Date:	End Date:		Type of Leave:
	of Technology while on leave with p		eturn the full amount of compensation the Institution for at least one year of service
Employee Signature:		Dat	e:
This form, which is to be comple Vice Provost for Faculty prior to	ted by the employee, must be rout the leave beginning. If the request	ed in GT-TRACS for appro- is for longer than one year	val by the Supervisor/Chair, Dean, and or is a request to extend a current leave of

* If the request is for a Regents' Innovator Leave, the request must follow the process outlined by the Office of Faculty Affairs.

absence more than a year, the request must also be approved by the Provost and Chancellor.