

Student Leave Request Form

Student Name _____

Student's RA Advisor or Lab Coordinator signature _____

Student's email address _____

Date(s) you are requesting leave

Do you have any assigned duties that you will be unavailable for because of this leave?

If you will be unavailable for any of your assigned duties, what are they?

What arrangements have you made to have your duties covered by someone else?

Are there any special circumstances surrounding this leave that we should be aware of?

Copies of this form should be given to your immediate supervisor and to Celeste Hackett prior to when you plan to take leave. Failure to have leave pre-authorized (other than unplanned sick leave such as a doctor's appointment) could result in the termination of your assistantship. For entire leave policy, see the Physics & Astronomy Graduate Handbook.