APPLICATION FOR FACULTY/ACADEMIC PROFESSIONALS
LEAVE OF ABSENCe
Arizona State University

Applicant’s Name ___________________________ Date __________________
Title or Rank ________________________________
College ___________________ Division _______________________
School ____________________ Department ______________________
Number of Years of Continuous Service at ASU _________
Other Leaves of Absence Granted ________________________________

Leave Requested _________ Semester, 19____-____; Academic Year 19____-____;
Fiscal Year 19____-____; __________ Six Months, Fiscal Year 19____-____

Permission is sought to (circle one) count/exempt this leave of absence toward
years of service for promotion, tenure/continuing status, and sabbatical leave (see
note on back of page).

Reason for Request for Leave of Absence: (State clearly and concisely the reason
for your request for a leave of absence, benefits to be achieved, writing and
publications planned, and other pertinent information.)

SAMPLE

Use other side if necessary.

If granted a Leave of Absence Without Pay, I agree to abide by the terms of the
Leave of Absence as set forth in the Academic Affairs Policies and Procedures
Manual (ACD 707). I also agree to resign from all campus obligations, including
committees at department, college and university level during the term of the
leave.

(Applicant’s Signature) ____________________________________________________________________________

Approved by:

(Department Chair) __________________ (Date) (Division Head or Director) __________________ (Date)

(Dean) __________________ (Date) Applicant Notified: __________________ (Date)

If request is for extension beyond one year or for other unusual circumstances,
further approval is required:

(Vice Provost) ____________________________________________________________________________ (Date)

Note: As soon as approval has been given and the applicant notified, a copy of
this form and a copy of the letter notifying the applicant must be sent to
the Office of the Provost for record-keeping purposes. Processing the
Personnel Action Form is the responsibility of the applicant's home unit.
Note: The period of one year or less granted as a leave may be counted toward years of service for promotion, tenure/continuing status, and sabbatical leave when the leave is in the best interest of the faculty member and the University. Leaves granted purely for personal reasons having no significant relationship to the professional activity of the faculty/academic professional member may be exempted from the probationary period, if requested by the faculty member and deemed appropriate by the institution. Such exemption must be agreed to by both parties, in writing, at the time the leave is granted. A one-year leave granted for professional reasons, such as fellowships, visiting appointments, and research grants, will not interrupt the sequence of probationary years. Any additional leaves during the probationary period may be exempted from the probationary period. Such exemption must be agreed to by both parties, in writing, at the time the leave is granted.

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