



Leave of Absence or Hold
Business Reasons
Departmental Use Only

Leave or Hold Information

Employee Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_
Department Number: \_\_\_\_\_ Department Name: \_\_\_\_\_

Type Requested:

- Sabbatical (All required documents have been submitted to Dean's Office)
One Semester
Beginning Date of Leave \_\_\_\_\_ Proposed Return Date \_\_\_\_\_
Base Salary \_\_\_\_\_
Two Semesters or Academic Year or Fiscal Year
Beginning Date of Leave \_\_\_\_\_ Proposed Return Date \_\_\_\_\_
Base Salary \_\_\_\_\_ 60% Salary \_\_\_\_\_
IMPORTANT: Salary changes to be entered by OHR Only (It will impact Benefits and Retirement).
Administrative Leave [ ] Paid [ ] Unpaid [ ]
Hold with Benefits (Required Agency Org No. \_\_\_\_\_ to cover ERE costs.)
Hold without Benefits (Employee will be sent COBRA rights.)

Dates of Leave or Hold: From: \_\_\_\_\_ To: \_\_\_\_\_
(first day of leave) (proposed or revised return to work date)

Business Reason for Hold - Required :

Supervisor Approval

Supervisor or Designee Name (Print) Supervisor or Designee Signature Date

Required for all Leave Requests

Budgetary Approval: (signature of VP, Dean, or Designee) Date

Send to:

- Department Leaves Manager [ ] Original
Benefits Design & Management
For Tempe or Polytechnic campus employees: Fax to 480-993-0007 [ ] Copy
For Downtown Phoenix or West campus employees: Mail Code 2051 or Fax to 602-543-8412 [ ] Copy