BIOLOGY GRADUATE LEAVE REQUEST

This form must be submitted and approved in advance for travel and other absences from duty. **Note: All Leave must receive the required approvals prior to departure.**

Date

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
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<tr>
<td>☐ Research Assistant</td>
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<tr>
<td>☐ Teaching Assistant</td>
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<td>☐ Other</td>
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Dates of Leave or Absence

From: _____________ To: _____________

Total Leave Time:

(Specify hours, days, semester, etc.)

Destination: _____________________________

Please provide a reason for Leave, explanation of how your duties (classes, meetings, etc.) will be covered, as well as, who will substitute (if applicable) in your absence: **This information is required - No exceptions.**

I hereby certify that the above statements are true and correct.

Applicant Signature: ________________ Substitute Signature: ________________

Date ________________ Date ________________

1. ☐ Approved ☐ Disapproved Major Advisor/Date: ____________________________
2. ☐ Approved ☐ Disapproved Teaching Lab Instructor/Supervisor/Date: ____________________________
3. ☐ Approved ☐ Disapproved Kimberly Piccolo/Date: ____________________________
4. ☐ Approved ☐ Disapproved Department Chair/Date: ____________________________

Explanation if Disapproved:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________