



Non-Medical Leave of Absence Request Form

Send this completed and signed form to Human Resources along with any required documentation. Requests for non-medical leaves of absence should be made at least 30 days in advance whenever possible. Faculty and staff should read the appropriate leave of absence policies in the [HR Employment Policies](#) prior to completing the Non-Medical Leave of Absence Request Form.

Employee Information

Employee Name:	SU ID:
Non-SU Email:	Non-SU Phone:
Faculty or Staff:	Date of Hire:
Title:	Department:

Leave Information

Type of Leave (except for Military Service, employee must have completed 12 months of continuous service with SU):

Military Leave (verification from appropriate military authority must accompany this form)

Military Service

Reservist and National Guard Annual Training (full-time employees, up to 10 university workdays in a calendar year, see policy for pay provisions)

Personal Leave (full and part-time regular employees, up to 30 days, unpaid)

Reason:

Educational Leave (full-time regular employees, up to 12 months, unpaid)

Uncompensated Leave (faculty only, must be approved by Provost, unpaid, up to 12 months)

Reason:

Start of Leave (first day absent from work):

End of Leave (last day absent from work):

Regular Hours worked/week: Full Time Part-Time

Intermittent Leave Request: Yes No If Yes, please list proposed schedule:

Accrued Leave Benefits

An employee may use vacation time to continue paid status during leave. Do you wish to use vacation time to offset the unpaid leave time?

Yes	No	If yes, how many hours do you want to use?	Hours	All Available
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Health Benefits

An employee on an unpaid leave greater than 1 full benefit month may continue to participate in the University's healthcare benefits program (except short term and long-term disability) by self-paying the full premium rates via check. If your proposed leave is greater than 30 days, will you be self-paying for premiums via check?

Yes

No

Not Applicable

Approvals

Please sign and return this form to Human Resources with any accompany documentation (military authority where requested). Please note that a leave is not approved until all approval/notification signatures have been obtained. You will be notified when the process is complete.

Employee Signature:

Date:

Dean/Department Head:

Date:

Note: Non-FMLA leave for faculty must be approved by the Provost. Please refer to the [Faculty Handbook](#) section 13 for details.