# Request for Academic Leave of Absence
# (1 – 7 calendar days)

**Note:** This form is to be submitted prior to leaving campus. If leave is 8 – 30 calendar days, a UPAY 573 form must be submitted for approval by the Dean's Office a minimum three weeks prior to leave. You should carry a copy of the approved UPAY 573 form during your absence.

To (Department Chair): _____

From: _____

Period of Leave: From: _____ To: _____

Reason for Leave: _____

_____

Destination: _____

*Person Responsible in my Absence: _____

Phone Number: _____ Cell/Emergency Only: _____
Email: _____Responsible Person's Initials: _____

***Copy of this form to be placed in safety binder in lab and initialed by person responsible.**

Revised 7/6/2011