

For instructions and definitions used, please see *Instructions for the Faculty Request for Leave Form*

Name _____ UT EID _____
 Job Title _____ Dean's Office Staff Contact _____

1. Please list ALL Primary and Joint faculty positions

College/School	Department	Percent Time	Requesting leave from this position?		Position ID
_____	_____	_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____
_____	_____	_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>	_____

2. Leave request information

Choose First Type: Leave Without Pay (LWOP) Release Time (RT)

Percent Time _____ Begin Date _____ End Date _____

a. Leave Reason(s) Research, Scholarship, Creative Works Visiting Faculty Professional Activities Personal

b. Project title or subject _____

c. Description of activity _____

d. Source(s) of leave stipend _____

e. Where will the individual be working? _____

Choose Second Type (if applicable): Leave Without Pay (LWOP) Release Time (RT)

Percent Time _____ Begin Date _____ End Date _____

a. Leave Reason(s) Research, Scholarship, Creative Works Visiting Faculty Professional Activities Personal

b. Project title or subject _____

c. Description of activity _____

d. Source(s) of leave stipend _____

e. Where will the individual be working? _____

3. Benefit to the university

To be completed by department administrator

4a. Length of faculty service _____

b. Previous LWOP and RT in last five years _____

To be completed by department head

5a. Teaching arrangements _____

b. Instructional and service-related activities that will remain _____

To be completed by dean's office

6a. Instructions for supplement _____

Signatures

Requestor	_____	Date	_____
Department Chair(s)	_____	Date	_____
	_____	Date	_____
Director(s)	_____	Date	_____
	_____	Date	_____
Dean(s)	_____	Date	_____
	_____	Date	_____

Executive Action

Approved

Approved with Contingency

Approved with Special Notification

Denied

Executive Vice President & Provost

Date _____

Instructions for the Faculty Request for Leave Form

Line 1. Positions.

Include all primary and joint positions, even if from multiple colleges. Note: Position ID's can be provided by a department administrator.

Line 2. Leave Type.

Choose up to two types per form, if applicable. Additional forms may be submitted if necessary.

- Leave Without Pay (LWOP) – Funding not paid/administered through the university.
- Release Time (RT) – Release from the instructional budget using funds administered through the university.

Line 2a. Leave Reason.

Check all boxes that apply.

- Research, Scholarship, Creative Works – e.g. grant research, college research fellowship, writing a book, etc.
- Visiting Faculty – e.g. Faculty teaching at another university; might/might not be part of a formalized Visiting Faculty Agreement.
- Professional Activities – e.g. Serving as Director of XYZ Institute.
- Personal – Do not include specific details on leave form.

Line 2b. Project Title or Subject.

Provide the name or subject matter of project you will be involved with while on leave (if applicable).

Line 2c. Description of Activity.

Provide a brief description of activities to be conducted during leave period. e.g. Conduct research related to work on book.

Line 2d. Source of Leave Stipend.

Include percent time funded by each source for both LWOP and RT requests. Include account number(s), if known, for Release Time requests. If an external organization/institution is paying the faculty member directly then that organization's name should be noted. Personal Funds should be noted in cases where a faculty member's own funds are being used.

Example 1

LWOP (100%): Guggenheim Foundation 75%, personal funds 25%

Example 2

RT (50%): National Science Foundation 25% (26-XXXX-XXXX), National Institutes of Health 25% (26-XXXX-XXXX)

Line 2e. Work Location.

Include international and/or domestic location(s); do not use abbreviations.

Line 3. Benefit to the University.

Include a brief description of why the leave is in the best interest of the university and how it will improve your teaching and scholarship. e.g. Will bring prestige to the university and new ideas and concepts to the classroom.

Line 4a. Length of Service.

Provide the number of years of faculty service at UT Austin.

Line 4b. Previous Leave(s).

Include the dates for all LWOP and RT leaves taken within the past five years.

Line 5a. Teaching Arrangements.

List the class(es) that will not be taught and describe how each will be handled. e.g. Class(es) will be canceled, taught in another semester, or taught by another faculty member (provide name).

Line 5b. Instructional and Service-Related Activities.

Describe the instructional and service-related activities that the faculty member will still be responsible for during the leave period. e.g. Supervision of graduate students, individual instruction courses, course development, advising, serving on budget councils and departmental committees. Indicate "None" if not applicable.

Line 6a. Salary Supplement.

Individuals on leave without pay for personal reasons may not continue to receive their supplement during the period of leave. The dean's office should provide instructions for handling the supplement, if applicable.