

**REQUEST FOR APPROVAL OF PROFESSIONAL OR RESEARCH LEAVE**

<b>NAME:</b> _____ <b>DATE OF REQUEST:</b> _____		
<b>TITLE:</b> _____ <b>RANK:</b> _____		
<b>DEPARTMENT:</b> _____ <b>SECTION:</b> _____		
<b>Date Leave to Begin:</b>	<b>Date Leave to End:</b>	<b>Date Returning to Work:</b>

**PURPOSE OF LEAVE:**

\_\_\_\_\_  
**Employee's Signature** **Date**

\_\_\_\_\_  
**Departmental Approval** **Date**

\_\_\_\_\_  
**Library Administration Approval** **Date**