The University of Scranton
Personal Leave of Absence Request

Part A: Employee Information:

Employee Name:____________________________ RoyalID: ______________________________

Supervisor: ______________________________ Department/Division: ______________________

Employee Phone: ________________________ Employee Phone (alternate): __________________

Employee Classification (check one):          ____________Exempt       ______________Non Exempt

Personal leave is unpaid. Accumulated sick, personal and/or vacation time may be used, as appropriate, during an approved personal leave.

Staff may be granted permission to work part time while on personal leave, with the approval of their supervisor and Human Resources. If working part time during Personal Leave:

For non-Exempt staff: Timecards must reflect number of hours worked and paid time off used, if any.

For Exempt staff: Paid time off used, if any, must be entered into electronic time system. Number of hours unpaid must be reported to Human Resources by email at HR@Scranton NO LATER THAN 10:00 AM each Friday of every week during the leave.

Part B: Request Information:

Reason for Request:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Amount of Leave Requested (number of day/weeks):

__________ days  (or)  _____ weeks

Beginning Date of Leave (Estimate if Necessary):

________________________________________

Ending Date of Leave (Estimate if Necessary):

________________________________________

Use of Accrued Paid Time Off:

Do you plan on using accrued personal or vacation time in conjunction with this personal leave request?

☐ Yes  ☐ No

__________ days  (or)  _____ weeks

Employee Name (print)____________________________  Employee Signature__________________________
The supervisor must review the request, determining whether the request is possible given the needs of the department. If the request is approved by the supervisor, the request is forwarded to the staff member’s department head (if not the supervisor) for review and approval. If the request is approved by the department head, it is then forwarded to the divisional vice president for review and approval.

a. If the request is approved at all levels, it is submitted to the Office of Human Resources for final review and approval, in consultation with the divisional vice president.

b. If the request is not approved at the supervisor, department head, or divisional vice president level, the declined request is to be returned to the employee, with a copy submitted to Human Resources

**Approvals for Personal Leave of Absence:**

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**Approvals for Use of Accrued Paid Time Off:**

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