

College of Agriculture, Consumer and Environmental Sciences Leave Request

Submission Checklist

To be completed by Department Head and submitted with complete request material to the Dean's Office.

Employee Name: _____

Department: _____

Academic Year of Proposed Leave: _____

Type of Leave (*Check one and indicate duration*):

Sabbatical Leave

Educational Leave WITH Pay

Educational Leave WITHOUT Pay

Personal Leave WITHOUT Pay

Professional Leave WITHOUT Pay

Fall

Spring

Full Academic Year

Information Provided by Employee

Request form

Detailed description of leave plan (**MUST** include info on a) benefit to university and state, b) any additional compensation to be received)

Grants or contracts discussed with Agency.

Information Provided by Department Head

Department Head Endorsement (on form and in memo)

Memo on ways in which department will meet student need during leave.

Information below on funds needed by department during leave:

Fall funds needed Amount: \$

Spring funds needed Amount: \$

Information below on employee:

Last leave type: _____ Date: _____

Year of hire at NMSU: _____

Please refer any questions to Dean's Admin Assistant