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| *Refer to the* [*Graduate Student Employee Leave Chart*](https://grad.berkeley.edu/wp-content/uploads/ase.gsr_.leave_.of_.absence.chart_050621-summer.pdf) *for details. For any questions regarding this policy, please contact the Academic Personnel Office at* *appolicy@berkeley.edu* *or People & Culture at* *addison\_elr@berkeley.edu* |
| **EMPLOYEE INFORMATION** |
| **Name:** |       | **Employee ID:** |  |
| **Email:** |       | **Department:** |  |
| EXTENDED ABSENCE DETAILS |
| **Action** *(mark all that apply)*:  | [ ]  New | [ ]  Modify Existing Leave | [ ]  Extend Current Leave | [ ]  Return from Leave |
| EXTENDED ABSENCE DETAILS |
| [**Leave Type**](https://sp.ucop.edu/sites/ucpathhelp/LocationUsers/LOCjobaids/UCPC_PHCMABML200JA_AbsenceRequest_LeaveDescriptions_D2Rev01.pdf)**:**  |  |
| **Start Date:** |       | **Last Date Worked:** |       |
| **Expected Return Date:** |       | **Actual Return Date:**  |       |
| **FMLA/CFRA/PDLL Leave** *(please select, if applicable)***:**  |  |
| **PAY DETAILS** |
| **Paid/Unpaid:**  |  |
| **JOB OVERRIDE** |
| Please indicate employee job record # to be excluded from this leave of absence: |   |
| NOTES ON THE LEAVE |
|       |
| APPROVALS |
| *I confirm that the above accurately reflects the approved action.* |
| **AP Analyst/Preparer Name and Title:** | Name | Title |
| **Contact Information (Email and/or Phone):** | Email | (510) 555-5555 |
| **Date:** |       |

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\* Please select the appropriate FMLA/CFRA/PDLL for the LOA if applicable.