

# DEPARTMENTAL LEAVE FORM

## Women and Gender Studies Program University of California, Davis

Complete this form for leaves of 1-7 calendar days in length during Fall- Spring Quarters. Absences of 8-30 calendar days require approval of the Dean, College Of Letters and Science. Submit this form to the Chair prior to your department.

NAME \_\_\_\_\_

DATE OF DEPARTURE \_\_\_\_\_ DATE OF RETURN \_\_\_\_\_

DESTINATION \_\_\_\_\_

REASON FOR LEAVE \_\_\_\_\_

NUMBER OF CLASS SESSIONS MISSED \_\_\_\_\_

DISPOSITION OF CLASSES DURING LEAVE \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED

CHAIR \_\_\_\_\_ DATE \_\_\_\_\_