

COLLIN COLLEGE
APPLICATION FOR LEAVE
 (Associate Faculty and CE Instructors)

Date: _____

Name:		CWID:		Dept.:	
Organization Code:	Account:	Central Park Courtyard	Spring Creek Preston Ridge	CHEC Other (specify):	
Full Time and Associate Faculty (Complete this form for Leave Without Pay, or Jury Duty)					
<u>Is Sub Required?</u> Yes No					
If Sub Required, Give Name: _____			CWID: _____		
Course # _____		Course # _____			
Course # _____		Course # _____			
TYPE OF LEAVE		TOTAL HOURS USED	FIRST DAY, MO/DD/YR	LAST DAY, MO/DD/YR	
SEND TO HR FIRST:					
Jury Duty (395)					
Leave Without Pay (422)					
Contact Human Resources Immediately if LWOP occurs after the 15th of the month		<u>For Human Resources Use Only:</u> 			
In compliance with written college policies and procedures, I certify that I am eligible to receive leave as requested and that the statements above are true and correct.					
Approval _____		Supervisor		Date _____	
Approval _____		VP/Dean/Director		Date _____	

- 1) Send Jury Duty Summons to Mae Francis in Human Resources office for approval.
- 2) Send Military Order to Sandy Davis in Human Resources office for approval.
- 3) Send Leave Without Pay form to Jonene Kemp in Human Resources office.
- 4) If a sub was required for a faculty absence, this form must be accompanied by sub form(s).