Request for Leave of Absence (LOA)

For general leaves of absence, a "Request for Leave of Absence" form must be completed and submitted to department head for approval. If approved, the department head should sign and send the request to Human Resources for approval. Please refer to the Human Resources website for more detailed information regarding the LOA policy at [http://www.luc.edu/hr/policy_loa_fmla.shtml](http://www.luc.edu/hr/policy_loafmla.shtml).

### Employee Information:

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Employee ID #: ________________</th>
<th>Leave contact phone number: ____________________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Dept: ___________________________</th>
<th>Title: ________________________</th>
<th>FTE: ______</th>
<th>Hire Date: ____________</th>
</tr>
</thead>
</table>

Print name of Supervisor: ____________________________
Ext: ______________

### Leave Information:

<table>
<thead>
<tr>
<th>Start date for LOA: ________________</th>
<th>Anticipated return date: ________________</th>
</tr>
</thead>
</table>

Reason for request: ________________________________________________________________________________________

Signature of employee: __________________________________________ : Date ______

### Approvals:

Dept Supervisor:
Signature: __________________________________________ Date: __________________________

Second level review:
Signature: __________________________

- [□] Position held for max of ________ (length in calendar days)
- [□] Position not to be held.

HR: ________ (initial here) Comment: ________________________________________________________________________