Personal Leave Application Brigham Young University

Personal Ir	nformation		righam fou	ng University	Revised: March 2024
Name: BYU ID: Faculty State	us:			Department: College: Current Rank:	
Leave Info	rmation				
Start Date:		End Date:			
Leave Purpo Missi MTC	on President or	spouse Templouse Visitor Co	e Preside	• •	
	r(see Faculty Le	avec Policy):			
	•	,	nurnosa	of your personal	leave:
		onal leaves are eption to this p	not funde	ed by BYU and ge	etails as separate documents, as necessary. nerally are <u>not</u> compensated. If
-	•	sition, are you	requestin	g a delay to your	review clock?
Yes	No				
Previous P	ersonal Leav	e (if applicab	ole)		
Start Date:		End Date:			
Leave Purpo	se:				
		spouse Temple ouse Visitor Ce			

Other:

Military Service

Signatures

By signing this form, the applicant agrees to contact Benefits Services before and continuation or termination of insurance coverage and any other program(s) in whether the services before and continuation of insurance coverage and any other program(s) in whether the services before and continuation of insurance coverage and any other program(s) in whether the services before and continuation of insurance coverage and any other program(s) in which is serviced by the services before and continuation of insurance coverage and any other program(s) in which is serviced by the services before and continuation of insurance coverage and any other program(s) in which is serviced by the serviced before and continuation of insurance coverage and any other program(s) in which is serviced by the ser		
Faculty Member	Date	
Department Chair	 Date	
Dean	Date	
Associate Academic Vice President–Faculty Development		
President President	 Date	