**Tennessee State University Office of the Dean**

**Nashville, Tennessee 37209-1561 College of Arts and Sciences**

REQUEST FOR LEAVE FROM OFFICIAL DUTIES AT THE UNIVERSITY

 This form is to be used in securing leave from official duties. After filling in two (2) copies of the form, kindly secure the signatures indicated below. After this form is approved, a copy will be returned to each of the persons signing the request. (The two copies **must** arrive in the Dean’s Office **two weeks prior to leave date**).

 Date

 TO: Dr. Gloria C. Johnson, Interim Dean

 College of Arts and Sciences

FROM: \_\_\_ \_\_\_\_

 I hereby request permission to be absent from my official duties as indicated below:

 TOTAL DAYS

LEAVING RETURNING REQUESTED

 .

 DATE HOUR DATE HOUR NO. OF DAYS

DESTINATION: .

 (Please give City, State and Address)

REASON FOR TRIP (ATTACH DOCUMENTS): .

SOURCE OF FUNDS

The following arrangements have been made for my work during my absence.

HOUR CLASS OR DUTY PERSON SERVING DURING ABSENCE

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NUMBER OF PREVIOUS TRIPS THIS FISCAL YEAR:

Funded by Partially Funded by Partially Funded by Total Number of

State Funded by State Grant(s) Funded by Grant(s) Other Previous Trips

 Signature of Person Making Trip

APPROVED:

 Coordinator, Director, Dept. Head College Dean or Director of Library

**NOTE:** Only one professional trip per year using state funds will be approved for faculty (this includes full-time and part-time) for the academic year.

In the event the Dept. Head, Coordinator, Director or Dean should ask for a written report of trip made, complete compliance will be expected with a copy going to the persons listed above.