

Leave Request Form

Individual service directors must be informed three months prior to the start of vacation plans that occur while assigned to their rotation. One week of vacation is permitted during any rotation period provided the service director receives three months notice. While no rotation is exempt from properly requested leaves of one week or less, Service Directors may decline vacation requests without proper notice. Scheduling more than one week of vacation during an individual rotation is *highly discouraged and requires special approval from both the service and program directors*. Leave forms must be signed by the **Service Director** and returned to the program coordinator **before** the vacation leave begins.

Time away for any reason other than vacation must also be approved in advance by the program director. A leave request form must be completed for each period of time off on any rotation at **any** affiliated hospital.

Forms are available from Jenny McDaniel in D185 Mayo. Or online at http://residency.pathology.umn.edu/current/policy_manuals/
The request can be returned to Jenny either in person or via fax at (612) 625-3976.

Today's Date: _____

Trainee Name: _____

Name of Rotation: _____

Dates of Requested Leave: _____ to _____

Circle Reason for Requested Leave:

- 1.Sick
- 2.Vacation
- 3.Professional/Conference (Indicate Conference Attended)_____
- 4.Other (please explain): _____

Approved:

Service Director

Date

Program Director

Date