

Academic Leave Request

University of Central Missouri

Academic leaves of absence are an important component of professional development at the University of Central Missouri. Academic leave is defined as “an absence from regular academic duties at the University of Central Missouri in excess of two weeks for the purpose of promoting scholarly and/or creative professional development.”

For more information, please refer to the University Policy Library, 2.2.020 Academic Leaves Policy (linked below).

Eligibility:

Typically, to be eligible to request an academic leave, the faculty/academic staff member must have served the university for at least two years of full-time service, unless program/university needs dictate otherwise. For more detailed information, please refer to the University Policy Library, 2.2.020 Academic Leaves Policy (linked below).

Application for an academic leave must be made in writing, by the individual concerned, through the appropriate offices as listed on the Request for Academic Leave sheet and according to the timeline to request an academic leave.

Instructions:

- Download, save, and complete the attached form.
- Sign and date the form and obtain the required signatures.
 - Research Leave Proposals must be submitted to the Graduate Education and Research Office for review by the University Research Council before submitting to the appropriate chairperson by the prescribed deadline in the policy.
 - It is highly recommended that you hand carry your completed and signed application to the Professional Enhancement Committee (Faculty Senate Office).

Timeline:

For the complete and current schedule of deadlines for submission, visit the University Policy Library, 2.2.020 Academic Leaves Policy, Section III “General Procedures and Submission Deadlines.”

<https://www.ucmo.edu/offices/general-counsel/university-policy-library/policies/academic-leaves-policy/index.php>

Academic Leave Request

University of Central Missouri

Date _____

Applicant _____

Last Name

First Name

Banner ID

Department _____

Type of Leave Being Requested

Discipline _____

_____ Funded

_____ Unfunded

Rank _____

_____ Study

UCM Email _____

_____ Research*

Office _____

_____ Exchange/Prof. Enhancement

Phone _____

_____ Sabbatical

Years of Service _____

_____ Fulbright Award

(attach award notice & contract)

I. Previous Leave Application(s)

Academic Year

Term(s)

Leave Type

Application Result

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

II. Length of Requested Leave

Academic Year _____ *(ex: 2024-2025)*

_____ Full Academic Year *(Fall, Spring, and Summer)*

_____ One Semester Only

_____ Fall

_____ Spring

_____ Summer

III. Application Statement

Please attach to this application, a statement to include the following:

- A detailed plan of what is to be done, where, when, why, and with whom.
- Explanation of outside employment during leave: contracts, stipends, grants, assistantships/fellowships, or any other source(s) of external funding.
- Explanation of how this leave will contribute to your professional development.
- Explanation of how this leave benefits UCM, your college, your department, your program, and your students.
- Explanation of how you will share your accomplishments upon return from your leave.
- Documentation (i.e. letters of acceptance, agreements, etc.) supporting your leave request.

IV. Supervisor Statement

Please have your immediate supervisor attach a statement of how your responsibilities will be covered during your leave. It must include any specific requests for replacement funds.

