1. **GENERAL INFORMATION**

|  |  |
| --- | --- |
| Employee full name: |  |
| Employee Number: |  |
| Department: |  |
| Leave type requested: | Study leave  Research leave  Sabbatical leave  Special leave  Casual leave |
| Proposed leave start date: |  |
| Proposed leave end date: |  |
| Does the employee hold a Certificate of Sponsorship with the University? | Yes/No |
| If yes to the above, please detail the new Location during the Leave: |  |

1. **REQUEST DETAILS**

Sufficient detail should be given for the purpose and proposed value of leave to be judged (please see regulations and note that a report on Study/Research Leave or Special Leave, if granted, is required within 3 months of your return from leave to be handed to your Head of School).

|  |
| --- |
| Leave purpose |
|  |

1. **FINANCIAL ASSISTANCE**

Please include requests for continuation of salary, pension contributions etc. You should note that these requests will not be met automatically and that there are restrictions on the financial provision for such purposes.

|  |  |
| --- | --- |
| Is leave to be paid or unpaid? | Paid/Unpaid/NA |

|  |  |
| --- | --- |
| Financial assistance | |
|  | |
| Request submitted by: |  |
| Date: |  |

1. **PhD Supervision**

Please include details of current PhD supervision responsibilities and how these will be met during your period of leave.

|  |  |
| --- | --- |
|  | |
|  | |
| Request submitted by: |  |
| Date: |  |

1. **APPROVAL**

**HEAD OF SCHOOL**

|  |  |
| --- | --- |
| I confirm approval of the leave request as detailed above. | |
| Head name: |  |
| Head signature: |  |
| Date: |  |
| Additional comments:  Please state whether this application has your support and comment on its implications for your school. Please note that no additional funding will be provided by the Budgetary Group. | |
|  | |

**DEAN/HEAD OF BUDGETARY GROUP**

|  |  |
| --- | --- |
| I confirm approval of the leave request as detailed above. | |
| Dean/Head name: |  |
| Dean/Head signature: |  |
| Date: |  |
| Additional comments:  Please comment on the request for leave. | |
|  | |

1. **RETURN TO**

Please submit the complete and signed instruction to your Faculty Office who will confirm the outcome with the applicant. A signed copy of this form will also need to be uploaded to your record - please send it to HR Transactions via [ServiceNow](https://sotonproduction.service-now.com/serviceportal?id=sc_cat_item&sys_id=cc32dc666f1cf24073b03f742e3ee4ac).

If you have any questions about research/study/sabbatical leave, please consult the [policy](https://www.southampton.ac.uk/assets/sharepoint/intranet/hr/How%20to/Policy%20-%20Study%20+%20research%20leave%20for%20academic%20staff.pdf) or contact [Ask HR](http://www.southampton.ac.uk/hr/services/ask-hr/index.page).