

***Research Leave Request Checklist***

Name: \_\_\_\_\_ Associate Dean: \_\_\_\_\_  
Semester/Year:  
Department: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Yr. \_\_\_\_\_  
Terms: \_\_\_\_\_ JRF RET 1 course 2 courses  
Requesting course coverage: n/a \_\_\_\_\_ No \_\_\_\_\_ Yes \_\_\_\_\_

**Requirements:**

- \_\_\_\_\_ 1. Statement outlining the programs to be followed while on leave.
- \_\_\_\_\_ 2. Chair's supporting letter
- \_\_\_\_\_ 3. Current Vita included.

***To be completed by the Dean's Office***

Assoc. Dean's Approval: \_\_\_\_\_