

**FLORIDA STATE COLLEGE AT JACKSONVILLE
REQUEST FOR LEAVE OF ABSENCE**

DATE _____ EMPL ID _____ WORK PHONE _____

NAME _____
Last First Middle

1. I WOULD LIKE TO REQUEST THE FOLLOWING LEAVE OF ABSENCE:

- Jury Duty *Attach copy of court summons and work certificate receipt for each day served*
- Military Leave *Attach copy of orders - Maximum of 17 days per calendar year*
- FL Volunteer Disaster Leave *Attach copy of documentation as specified in APM 03-1004*
- Domestic Violence Leave *Attach copy of documentation as specified in APM 03-1016*

OR

2. I WOULD LIKE TO REQUEST A LEAVE OF ABSENCE WHICH OCCURRED MORE THAN 60 DAYS AGO BECAUSE IT CAN NO LONGER BE ENTERED IN PEOPLESOFT:

- Annual Leave Sick Leave Sick Leave Personal

Employees MUST Complete this Section. For JURY DUTY, your End Time is the Time Reflected on your Court Receipt. We Allow an Additional 30 Minutes for Travel Time. If you DO NOT Return to Work after Jury Duty You Must Use Annual or SLP Time and it Needs to be Reflected Below. If you Return to Work – You Must Complete your Shift Hours on your Time Sheet.

START TIME FOR LEAVE	END TIME FOR LEAVE	DATE	TYPE OF LEAVE USED	WORKING HOURS ABSENT
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____

FOR HR USE ONLY:
 PROCESSED IN PS _____ BENEFITS NOTIFIED Y N PAYROLL NOTIFIED Y N

Signature of Employee _____ Date _____

Approval of Immediate Supervisor _____ Date _____