

Name _____ Soc. Sec. # _____ Date _____ Position # _____

LAST, FIRST MIDDLE

Appointment Basis: Academic Year or Annual Year

Appointment Status - Check one in each box:

Position/Rank 1 _____
Position/Rank 2 _____
Position/Rank 3 _____
Title 1 _____
Title 2 _____
Executive Management? Yes
Position/Rank/Title (freeform, optional) _____

- Faculty
 Librarian
 MSU Extension
 NSCL
 Specialist
 Other

- with tenure
 tenure system prob
 with continuing
 continuing system prob
 fixed term
 rolling fixed term
 contract
 rolling contract
 on-call
 no-pay

Table with 4 columns: Department Name, Code, Second Department Name, Code, Other Department Name, Code, Other Department Name, Code. Similar structure for College Name.

Continuing Employment Date _____
*Pay Dates of Leave: From _____ Through _____ and (if applicable) From _____ Through _____
Dates Away From Campus _____ Through _____ (only if different from Pay Dates of Leave)

- Type of Leave - Check all boxes that apply:
 Sabbatical: Locale: _____
 AY 1-semester leave - full pay
 AY 2-semester leave - 50% of pay for year of leave
 AN 6-month leave - full pay
 AN 1-year leave - 50% of pay for year of leave
 AN 3-month leave - full pay
 Short-Term Disability
 Parental From _____ To _____; From _____ To _____
 U.S. Military Service
 Study
 Other _____

Table for Dates of Previous Leaves with columns FROM and TO. Rows for Sabbatical, Short-Term Disability, and Other.

Authorized Pay (other than Sabbatical):
 With Pay (Specify): _____
 No Pay If No Pay, does the leave qualify under the Family Medical Leave Act of 1993? No Yes

COMMENTS: _____

Recommended by:
Primary Chairperson/Director Signature Date
Second Chairperson/Director Signature Date
Other Chairperson/Director Signature Date
Primary Dean/Adm. Head Signature Date
Second Dean/Adm. Head Signature Date
Other Dean/Adm. Head Signature Date
Academic Human Resources Date
Provost Signature Date
President Signature Date

- PROVOST COMMENTS:
 In accordance with normal practice the probationary end date is changed to _____.
 Leaves without pay can be extended for a 2-year period as a maximum under normal circumstances.
A return to regular duties on _____ is expected.

Required attachments: Information for Leave of Absence form for Study, Other leaves. Sabbatical Leave Information form for Sabbatical leaves.
Medical certification for Short-Term Disability leaves.
Medical certification or evidence of adoption for Parental leaves.
Copy of orders for U.S. Military leaves

* Pay dates for leave without pay for AY faculty/academic staff for Fall semester are: 8/16 through 12/31 and 5/16 through 6/30; for Spring semester, pay dates are either 1/1 through 6/30 or 2/16 through 8/15.