



# APPLICATION FOR ABSENCE FROM CAMPUS

## FOR LEAVES OF SHORT DURATION (Vacations and Conferences)

(FOR ALL OTHER ABSENCES, PLEASE USE THE *SPECIAL LEAVE FORM*)

Name of Applicant: \_\_\_\_\_ UCID #: \_\_\_\_\_

Faculty/Department: \_\_\_\_\_

Dates of Absence: \_\_\_\_\_  
(including first and last day)

Number of Days\*:      Vacation: \_\_\_\_\_      Other: \_\_\_\_\_

\*'day' or 'days' shall exclude Saturday and Sundays but include paid holidays which are observed by the University.

\*See table on page 2 – for approval Requirements

\*Leaves of Short Duration requiring Provost's Approval, please use the [Special Leave form](#)

### PURPOSE AND DESTINATION (Business Only)

### ARRANGEMENTS TO COVER ABSENCE

Signature of Applicant: _____	Date: _____
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The following is(are) my contact address(es) and/or phone number(s) while I am absent from campus:

Address: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_

### DEPARTMENT RECOMMENDATION/Approval of Head

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FACULTY RECOMMENDATION/Approval of Dean

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### AUTHORITY DELEGATED TO

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Retain a copy for your records and forward the original to your Dean's Office.**

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This information is collected under the authority of the Freedom of Information and Protection of Privacy Act. It is collected/accumulated for the purposes of establishing eligibility for absence from campus under Article 18 of The Collective Agreement and recording leaves of absence. If you have any questions about the collection or use of this information, please contact Human Resources at 220-5932.

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## LEAVES OF SHORT DURATION – Summary of Regulations (Clause 18.2)

**Description (18.2.1):** 'A member of the academic staff may be granted a leave of short duration not to exceed sixty-six (66) work days, with pay, from regular duties and responsibilities to enable the staff member to participate in activities which are directly related to the staff member's regular duties and responsibilities at the University. '

**Duration and Approvals (18.2.2):**

Leave to be Taken Within the Period	Length of Leave Which May Be Approved by	
	Head	Dean
(a) From September 1 to April 30	up to and including 5 consecutive work days	up to and including 22 consecutive work days (inclusive of vacation entitlement and any days approved by Department Head)
(b) From May 1 to August 31	up to and including 20 consecutive work days in addition to annual vacation entitlement	not to exceed 66 consecutive work days (inclusive of vacation entitlement and any days approved by Department Head)

**Vacation entitlement** – From 22-30 days (depending on length of service) - Department Head must be notified. If vacation is during period (a) in the chart above, Dean's approval is required.

Please complete the **Special Leave form** (requiring Provost's Approval) for the following cases:

- Leaves (including annual vacation) that are not entirely within either period (a) or period (b)
- Leaves which exceed 22 consecutive days in period (a)
- Leaves (or combination of leaves) which exceed 66 consecutive days (including annual vacation)
- Leaves which commence within 66 days\* of the effective date of an academic staff member's appointment

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### Leaving the country on vacation or business?

[CLICK HERE](#) to obtain more information about 'Out-of-Country' coverage. If you need proof of coverage, please contact UService at [hr@ucalgary.ca](mailto:hr@ucalgary.ca) or call (403) 210.9300.

### Travelling out of country on business?

[CLICK HERE](#) to complete the University of Calgary International Traveller Registration Form.

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