**UNIVERSITY OF SIERRA LEONE**

**APPLICATION FOR LEAVE OF ABSENCE**

**(Use Separate Sheet(S) When Necessary)**

# **Part I**

**To Be Filled By Applicant**

# 1. Name of Applicant (Prof/Dr/Mr/Mrs/Ms:…………………………………………………………………

# 2. Name of College/Institute to which applicant is presently assigned:………………………………..……..

# 3. Date of First Appointment Present Position and Department:………………………………………...........

…………………………………………………………………………………………………………………

# 4. Present Salary and Scale:………………………………………………………………..……………….…

5. Proposed Course of Study/Research/Assignment:……………………………………………….………….

6. Proposed Institution/Agency (Name & Full Addresses):……..…………………………………………….

…………………………………………………………………………………………………………………

7. Any Available evidence of acceptance?………………………………………..

 **(Attach Photocopy)**

 8. (a) Duration of Study/Research/Assignment Commencement date:…………………

9. Has applicant enjoyed Leave of Absence before:……………………………..

Give Dates………………………………………………………………………….

10. On a sheet of paper applicant should briefly state why he/she wishes to undertake the proposed Course/Research/Assignment.

……………………………. ………………………………..…………………

DATESIGNATURE OF APPLICANT

## PART II

**TO BE COMPLETED BY HEAD OF DEPARTMENT**

1. Has applicant discussed application with you?………………………………..……………………..

2. (a) Recommended/Not Recommended

 (b) Reason(s)::……………………………………………………..……………………………..

3. Will additional staff be required?.........................................................................................................

 DATE & SIGNATURE OF HEAD OF DEPARTMENT:……………………..……………………………

### PART III

**TO BE COMPLETED BY DEAN AND DEPUTY VICE CHANCELLOR**

1. **To be completed by Dean**

Recommended/Not Recommended Reason(s):

 DATE SIGNATURE OF DEAN

1. **To be completed by Deputy Vice Chancellor**
2. Application for Leave of Absence has been discussed with me.

I do/do not approve.

………………………….. …………………………………………….

 **DATE SIGNATURE OF DEPUTY VICE CHANCELLOR**

**PART IV**

**REGISTRAR’S COMMENTS**

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

SIGNATURE: ……………………… DATE: ……………………………

**PART V**

**DECISION OF THE VICE-CHANCELLOR AND PRINCIPAL**

………………………………………………………………………………………………

………………………………………………………………………………………………

SIGNATURE: ……………………… DATE: ………………………