

# SRET GRADUATE ASSISTANT REQUEST FOR LEAVE FORM

SRE Routing	
<input type="checkbox"/>	GRA Supervisor
<input type="checkbox"/>	Patrick Uchigakiuchi
<input type="checkbox"/>	A. Michael Wylie
<input type="checkbox"/>	Patrick Uchigakiuchi

Date \_\_\_\_\_  
 To A. Michael Wylie  
 From \_\_\_\_\_

Reason for Leave (please check and fill out appropriate section)

**Vacation** I would like to request the following dates off for vacation. Include total hours of work missed.

Supervisor to fill out	
I, _____ approve of the above vacation leave.	
Signature _____	Date _____

**Sick Leave** I would like to inform you that I sick on the following date(s). Include total hours missed:

**If checking Vacation OR Sick Leave, please also fill out the following section:**

During this leave ( please check one)

I am collecting overload and will make up \_\_\_\_\_ hours during the time period of:

I am not on overload

**Professional Sponsored Activity**

\_\_\_\_\_ Activity Title

\_\_\_\_\_ Date and Total Hours Missed

Benefits for attending: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I approve of the above request for leave

I DO NOT approve of the above request for leave

\_\_\_\_\_  
A. Michael Wylie, Ph.D.  
Principal Investigator

\_\_\_\_\_  
Date

cc: C. Sakagawa, SRET Facilitator  
R. Lee, Integration Services Associate