## UNIVERSITY OF NORTH TEXAS FACULTY DEVELOPMENT LEAVE APPLICATION COVER SHEET

Please insert the required information in the application form. Please electronically submit the original to the Provost's Office with chair and dean signatures. If approved, this form shall also serve as the Request for Leave (VPAA-150).	
Applicant:	EMPLID:
Department:	
College/School:	
Rank:	
Date of Last Faculty Development Leave:	Year of Initial Faculty Appointment:
Type of Leave:	
Grant Class I – Research Grant Clas	s II – Creative Grant Class III – Renewal
Leave Period Requested:	
Fall (100%) Spring (100%)	<sup>1</sup> Fall (50%) Spring (50%)
Other (%)	
Anticipated Replacement Cost (Covered by	Department or College): \$
Proposal Title:	
Applicant Signature:	Date:
Approvals:	
Department Chair:	Date:
Dean:	Date:
FDL Committee Chair:	Date:
Provost:	Date:

<sup>1</sup>If the Leave Period is spread across the fall and spring semesters, your FTE will be reduced to 50% for this time period. This will classify you as a part-time employee according to the Employees Retirement System's (ERS) rules. Part-time employees only receive 50% state contribution for employee health insurance and basic life coverages, and 25% state contribution for dependent health insurance coverage, whereas full-time employees receive 100% and 50%, respectively. Sick Leave accruals will also decrease from 8 hours (100%) to 4 hours (50%) per month.