## School of Mathematical and Physical Sciences

## Faculty Request for Leave of Absence form (Please return to the Head of Department via in tray in School Office)

Please use this form for absences of more than 2 days during term, or more than 2 weeks out of term, for which permission is required from the Head of Department. It is your responsibility to inform your Department of any planned absences, to arrange cover for teaching and supervision, and to leave contact details. You may do that by email to <u>physicsoffice@sussex.ac.uk</u> or <u>mathsoffice@sussex.ac.uk</u>.

Please check the MPS Google calendar for key dates http://www.sussex.ac.uk/mps/internal/staff/calendar

Your Name:				
Department: please circle	Mathematics	Physics & Astronomy		
Leave dates from:		Return date:		
Does the absence include? please tick	Induction week (Sept	Induction week (September) Exam Boards (various)		
Reason for leave:	If attending a conference, ple	ease give nai	me and url	
Contact details:				
If you are travelling within the UK or outside, please confirm that you have applied for travel insurance <u>www.sussex.ac.uk/finance/documents/business-travel-abroad-application-form-word.docx</u> and have completed the travel risk assessment form <u>http://www.sussex.ac.uk/hso/documents/otssra-form.docx</u>				
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## Arrangements to cover teaching and other duties *Please* indicate with a $\sqrt{}$ if the substitute has agreed:

	Details	Substitute name	$\checkmark$
Lecture course/Lab*			
Dates and times			
Workshop/class*			
Dates and times			
Research Students name(s)			
MSc/UG projects/			
RP/summer students			
Academic Advisees			
Examining (e.g. presence			
during exam, exam & project			
marking and checking)			
Administrative duties (e.g.			
Exam Board & other			
committees)			
No arrangements are required			

## Please note that your office may be used for visitors or other purposes while you are away.

\*It is your responsibility to inform students about the alternative arrangements.

Signed .....

Date .....

Request agreed	Date
by Head of Department. Once agreed, this form will be retain	ned by the Course Co-ordinator. If the absence is
not agreed you will be contacted about this.	
Version01/2015	