

Administrative Leave Application

2024/25 Academic Year

The application must be submitted to your line authority no later than October 2, 2023

| Name: | | V00 | | | |
|--|--------------|-----------------|--------------|--|--|
| Academic Unit: | | Rank: | | | |
| Faculty: | | | | | |
| | | | | | |
| REQUESTED LEAVE # of months requested: | SIX | TWELVE | | | |
| Starting on: | 1 July, 2024 | January 1, 2025 | | | |
| Ending on: | 31 Dec, 2024 | 30 June, 2025 | 31 Dec, 2025 | | |
| Comments: | | | | | |
| | | | | | |
| As per the provisions of the Collective Agreement, if leave is granted, I agree to return to my duties at the University for not less than a period of time that is equal to the length of the leave (unless waived by the Provost); and, upon return, to file the prescribed report prior to the next salary adjustment review as per Article 34. | | | | | |
| Applicant Signature | | Date | | | |

QUALIFYING SERVICE PERIOD DETAILS

The 'qualifying service period' is the length of time since either your initial appointment or return from the most recent study or administrative leave, and the day before the start day of your current leave request.

| What were the dates of your last study or | То | N/A | |
|--|------------------------|-------------------------|---------------------|
| Qualifying service period start date: | | end date | |
| Number of months in qualifying service p | eriod: | | |
| Were any previously approved study leav | res deferred? | | |
| No | | | |
| Yes, at my request F | Reason: | | |
| Yes, at the request of the Univer | sity | | |
| Do you have a study leave credit that was | s previously granted? | | |
| No | 70 | | |
| Yes, at recruitment | # of months: | | |
| Yes, due to deferral | # of months: | | |
| Were you on a Reduced Workload/part-ti | me appointment at some | time during the qualify | ing service period? |
| Yes No | | | |
| The Collective Agreement stipulates that indicate if you have taken a leave during | | | f service. Please |
| Type of leave taken: | | | |
| Start date: | End date: | | |
| Type of leave taken: | | | |
| Start date: | End date: | | |
| Type of leave taken: | | | |
| Start date: | End date: | | |

| All of the following sections must be completed. You should attach relevant supporting documents to your application, and indicate the name of the attachment within the relevant section. | | | | |
|---|--|--|--|--|
| I. ABSTRACT | | | | |
| Provide an abstract explaining the proposed project for the leave, including an indication of the relationship between the objectives of the project and your duties and scholarly activities at the university. | | | | |
| Attachment Name | | | | |
| N/A | | | | |
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| | | | | |
| | | | | |
| | | | | |
| II. PLANNED ITINERARY | | | | |
| | | | | |
| Attachment Name | | | | |
| N/A | | | | |

| III. USE OF FACILITIES AT UVIC | | | | | |
|--|--|--|--|--|--|
| Provide a statement outlining the proposed use of any space or facilities at Uvic during the leave | | | | | |
| Attachment Name | | | | | |
| N/A | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |

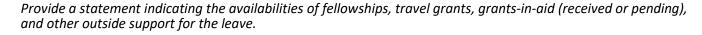
IV. COLLABORTATION WITH OTHER INSTITUTIONS

Where collaboration or use of facilities at other institutions is an integral element of the proposed project, provide either a) documentation with respect to arrangements that have been completed; or b) requests for the use of facilities or plans for collaboration

Attachment Name

N/A

V. FUNDING OPPORTUNITIES



Attachment Name

N/A

VI. SUPERVISION OF GRADUATE STUDENTS

State arrangements made for the supervision of graduate students. Please name the interim supervisors, or indicate how you will continue to be involved in their supervision while on leave

Attachment Name

N/A

VII. SCHOLARLY UPDATE

Provide an update of scholarly developments resulting from your previous leave, if applicable.

Attachment Name

N/A