



Non-unit Professional Development Leave Program Application and Agreement of Terms

Purpose:

Professional development leaves are granted to increase an employee's value to the University through opportunities for research, writing, professional renewal, further education, or other experiences of professional value. While such leaves may be provided in relation to an employee's years of service, they are not primarily a reward for service.

Professional development leaves are taken at full-pay for one semester and is subject to the conditions set forth below as per [UCF Regulation 3.014 Faculty and Administrative and Professional Development Leave Programs](#).

Requested Period of Development Leave Program:

Requested semester

Semester

Employee Name

Employee ID

College/Unit

Department/School

By signing this form, I acknowledge and agree to the professional development leave program requirements as outlined in this form, accompanying documents and [UCF-3.014 Faculty and Administrative and Professional Development Leave Programs](#).

Employee signature

Date



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Application Process

Please attach a statement of your professional development leave plan. In accordance with [UCF-3.014 Faculty and Administrative and Professional Development Leave Programs](#), each application shall include:

A **two-page** statement describing

- the project or work and activities to be followed while on professional development leave;
- the expected increase in value of the employee to the University and unit;
- specific results anticipated from the leave; and,
- any anticipated supplementary income, provide details.

Your immediate supervisor shall review and comment on your application prior to submission to Faculty Excellence. Please submit your completed application and two-page statement via email to [Faculty Excellence](#) by the designated due date and **copy your immediate supervisor and your dean, director, or unit head on the email**. Should you have any questions please contact Faculty Excellence at (407) 823-1113 or facultyexcellence@ucf.edu.

Supervisor Comments - Please provide comments in text box below.

Employee's Supervisor Print Name

Employee's Supervisor Signature