

Non-unit Professional Development Leave 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 either full-pay for one semester or term or at three-fourths pay for one academic year and are 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:

One semester at full pay	Semester	
Two semesters at ¾ pay	Semester one	Semester two
Employee Name		Employee ID
College		
Department/School		
By signing this form, I acknowledge and agree to the professional development leave program requirements as		
	aculty and Adminis	strative 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 <u>UCF-3.014 Faculty</u> and Administrative and Professional Development Leave Programs, each application shall include:

A two-page statement describing

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

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 faculty excellence@ucf.edu.

Supervisor Comments - Please provide comments in text box below.

Employee's Supervisor Print Name

Employee's Supervisor Signature

Phone: 407.823.1113 • Web: facultyexcellence.ucf.edu • Rev. 9/2023