



Date: \_\_\_\_\_

College of Engineering  
Montana State University

Leave From Campus Request Form

Please Submit this form in advance of any planned absence from campus. Any travel expense voucher which will be submitted as a result of this leave from campus must detail only those expenses associated with the University business described below.

Your Name: \_\_\_\_\_

I'll be off campus the following dates: \_\_\_\_\_

- Purpose of leave: ☐ Annual Leave  
☐ Sick Leave  
☐ University Business (list meetings, etc., and corresponding dates)
- ☐ Consulting (If any consulting activities are planned during the leave, indicate the date(s), and locations(s) of the planned consulting)
- ☐ Other: (please describe)

During this time I can be located at (address and phone number)

I will miss the following classes:

The following arrangements have been made for my absence:

\_\_\_\_\_  
Requestor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dept. Head Signature

\_\_\_\_\_  
Date