



## REQUEST FOR ACADEMIC RELEASE TIME DURING REGULAR WORK SCHEDULE

*This form must be filled out and submitted to the LSC Office of Human Resources in order for staff members to enroll in a class during their regular work schedule. In general, approval to take courses during work time will be limited to one course (3-4 credits) per employee per semester.*

TO: \_\_\_\_\_  
(Supervisor)

I request approval to enroll in the course \_\_\_\_\_  
during the \_\_\_\_\_ semester, 20\_\_\_\_. The course meets on \_\_\_\_\_ at \_\_\_\_\_  
(days) (times)  
and will necessitate my missing \_\_\_\_\_ work hours during my normal work week.

Those hours will be made up as follows (please specify days and times):

\_\_\_\_\_

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

To be completed by supervisor:

Approved

Disapproved

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