## TEXAS A&M \*\* ENGINEERING

## Faculty Requests for Alternate Work Location/s, Leave of Absence, Leave Without Pay

This form is required for a temporary or permanent change of headquarters and allows justification of travel and other expenses from a location other than College Station

## - PLEASE TYPE - HANDWRITTEN FORMS NOT ACCEPTED -

This request is for:	A travel request will be filed in coordination with this activity
UIN Name (Last, First)	Title Dept. & Div. Code
Com	nplete for off-site requests
Location and duration of request: Start Date	End Date (if temporary relocation, this will be the last day of reimbursable expenses)
Location 1: Co./Institution	City St. Country
Dates at this location (if multiple locations): Start Date	End Date
Location 2: Co./Institution	City St. Country
Dates at this location: Start Date	End Date
Location 3: Co./Institution	City St. Country
Is this for a TAMU Faculty Development Leave	re? ○Yes ○ No If yes, stop here and attach copy of FDL approval.
Will you receive salary or payment for this activity? Ye	es CNo If yes, provide details of compensation in the justification below
	luding focus of work, interactions with locations visiting and benefit to TAMUS. The additional sheet if necessary; incomplete explanations will be returned.
	Current Date
Faculty Signature  Division/Department Head Signature	Executive Associate Dean Signature
Departmental Business Administrator Signature	Dean of Faculties Signature