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APPLICATION

An applicant submitting a plan to achieve a second certificate or diploma must demonstrate the necessity of the combination of certificates or diplomas to the attainment of his or her career goals at UFV.

An applicant holding an undergraduate degree will not be approved to pursue studies which lead to another degcas760.004 0.1 stil

Staff Educational Leave

to conduct thesis research or to write the thesis must contain measurable goals with detailed timelines and a resulting product that will be wo Td(t441u50. 0.00 T57680nc-0i80.e1(s)d2.1241 (t)-2.74(0 T8(a),hRd690-6.(-TrTd867)-6.3 (h

Staff Educational Leave

- 9 The activity is of value to the institution related to UFV strategic goals: https://www.ufv.ca/president/ufv_strategic_directions/

Acceptable staff educational leave proposals will:

- (a) Detail a program or plan related to current job duties that is intended to assist the individual address needs as determined by evaluations and/or discussions with his or her supervisors
- (b) Detail a program or plan to advance the job-related interests and needs of the individual as perceived by the individual in consultation with his or her supervisor. This may include pursuing required job-related certificate, diploma or degree programs. All accredited undergraduate degree programs are considered job-related for UFV staff.

Referring to the criteria from above, applications must include the following information. Any questions while completing the application should be directed to the HR Professional Development Office.

- (i) _____ with proof of acceptance in program, timelines, goals, and a clear link to applicant's professional background and career development at UFV.
- (ii) Professional value to applicant **apt**
- (iii) Value to UFV
- (iv) Plan for submission of progress and final summary to

Staff Educational Leave

BY SIGNING THIS, THE SENIOR ADMINISTRATOR CONFIRMS THAT HE/SHE HAS APPROVED THE REQUESTED TIME PERIOD OF THE LEAVE AND IS AWARE OF THE SUBSTANCE OF THE LEAVE PLAN.

SENIOR ADMINISTRATOR NAME (PRINT) AND SIGNATURE

DATE

BY SIGNING THIS, THE APPLICANT CONFIRMS THAT HE/SHE HAS READ, UNDERSTOOD, AND AGREES TO COMPLY WITH ALL GUIDELINES SET FORTH IN THE STAFF EDUCATIONAL LEAVE APPLICATION PACKAGE. THE APPLICANT ALSO CONFIRMS THAT THIS APPLICATION IS COMPLETE AND ACCURATE.

APPLICANT NAME (PRINT) AND SIGNATURE

DATE

Completed application forms for staff educational leaves must be submitted in hard copy to Human Resources by **3** Email confirmation will be sent upon receipt of application. Late applications will not be accepted.

HR PROFESSIONAL DEVELOPMENT OFFICE

DATE

A. NAME OF PROGRAM: _____

B. DESCRIPTION OF EDUCATIONAL PROGRAM (attach program outline and any additional relevant program information):

C. DETAILED LEAVE PLAN (including, but not limited to, proof of acceptance in program, timelines, and specific and measurable goals and outcomes):

D. PROFESSIONAL DEVELOPMENT VALUE TO YOU (refer to the criteria for approval in the application package):

