

**Minnesota State University, Mankato
Leave of Absence Application Checklist**

Name of Faculty Member: _____ **Dept** _____

Letter of Request to President _____

Copied to: _____

 Department _____

 Dean _____

 VPAA _____

 HR _____

President Approval _____

Leave of Absence Offer Letter: _____

 Dates and Duration _____

 Benefit Information _____

 Seniority Information _____

 Tenure Clock Information _____

 Promotion Clock Information _____

 PDP Process Information _____

 Non-Renewal Process Information _____