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| **Time off for Public Duties Form**  **Name:** |
| **Faculty/Service:** |
| **Date(s) leave to be taken (unpaid):** **From:** **To:** |
| **\*\*Reason for Leave:** |
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| \*\* To cover the following:   * Justices of the Peace * Elected members of local authorities or police authorities * Prison visitors * Members of a statutory tribunal * Members of a relevant health body * School governors * Members of the General Teaching Councils for England and Wales * Members of the Environment Agency * (This list is not exhaustive) |
| **By signing this form you are agreeing to a period of unpaid leave** |
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| **Number of Days Required:** |
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| **Employee Signature:** |
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| **Leave Approved by Dean of Faculty/ Head of Service:** |
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| **Name:** |
|  |
| **Signature:**  **Date:** |
|  |
| **Received by HR on:**  **Payroll informed on:** |