

Human Resources
1980 Arthur Street
Louisville, KY 40208-2770

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Reduction- in- Force
Request for Leave of Absence Without Pay

Please Return To Human Resources within 30 days from the effective date of layoff. If the form is not received within the 30 day period, we will assume you do not wish to exercise this option.

Please Print

Name (Last, First, Middle):	Employee ID:
Title:	Department:
Period of Leave (Dates): From:	To:

Signature of Employee

Date

Vice President for Human Resources

Date