



Human Resources

Borough of Manhattan Community College
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Distribution

- Original to Personnel Office
- One Copy to President
- One Copy to Appropriate Dean
- One Copy to Chairperson
- One Copy to Staff Member

INSTRUCTIONAL STAFF
APPLICATION FOR SPECIAL LEAVE FOR PERSONAL EMERGENCY

INSTRUCTIONS: To be completed by staff member and reviewed by Chairperson, and appropriate Dean, then forwarded to President for approval. Staff members assigned to administrative offices must receive the approval of the appropriate unit head and the President.

Name _____ SS No. _____

Department _____ Title _____

I hereby apply for a special leave for personal emergency for the period

From _____ to _____. Number of days _____

In accordance with pertinent provisions of the Bylaws of the Board of Higher Education, the reason for the request is:*

Signature _____ Date _____
Applicant

Recommendation of Chairperson	Approve _____ Disapprove _____	Signature _____ Date _____
Recommendation of Dean	Approve _____ Disapprove _____	Signature _____ Date _____
Recommendation of President	Approve _____ Disapprove _____	Signature _____ Date _____

<u>For College Personnel Office Use:</u>	
Total personal leave days this academic year _____.	
Signature _____	Date _____
Title _____	

*In general, leaves should be restricted to the following: death or serious illness of a member of the immediate family; court proceedings (other than jury duty); and similar unforeseen emergencies.