

## TTUHSC Resident Leave Request Form

Email: [Dena.Hair@ttuhsc.edu](mailto:Dena.Hair@ttuhsc.edu)

**PLEASE READ:**

- 1) Use this form to request **any leave** for the residency year **2022-2023**.
- 2) Please complete all fields. If no current teaching or precepting activities, please state "none".
- 3) Please obtain signatures from both your **preceptor** AND from your **program director** for the period of absence.
- 3) Email this form to Dena Hair at [Dena.Hair@ttuhsc.edu](mailto:Dena.Hair@ttuhsc.edu) at **no later than 1 week before your leave (vacation or professional leave) or 1 week after your return from sick leave.**
- 4) All requested leave is subject to prior approval from the Program Director and Vice Chair for Residency Programs. Failure to complete all fields/signatures and submit within the requested time frame may result in an automatic denial of request. Approved forms will be uploaded to a Box folder that is shared with you.
- 5) You and your Program Director will receive a summary leave report via email.

Resident Name: \_\_\_\_\_ Date: \_\_\_\_\_

Campus:  Abilene  Amarillo  Dallas  Lubbock

Type of Leave:

- Vacation
- Sick
- Professional Leave (Please specify): \_\_\_\_\_
- Interview Leave (Please specify): \_\_\_\_\_
- Other Leave (Please specify): \_\_\_\_\_

Date(s) of Absence: <i>dates absent from work</i>	Total Day(s) Requested:

Teaching Activities scheduled during leave:

Teaching Activities will be covered by:

Has the covering person been notified and agreed to such responsibility?  Yes  No

Practice Site Activities will be covered by:

Current Preceptor Name:

Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residency Program Director Name:

Program Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*To Be Completed By Office of Residency Programs*

Vice Chair of Residency Programs Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## INSTRUCTIONS

### For FIRST-YEAR (as a TTUHSC employee) TTUHSC-paid residents:

*PGY1 Pharmacotherapy (Amarillo & Lubbock)*  
*PGY1 Pharmacy (Presbyterian & Harris Methodist)*  
*PGY2 Ambulatory Care (Amarillo)*  
*PGY2 Geriatrics (Dallas)*  
*PGY2 Oncology (Dallas)*

#### **If Submitting for Vacation Leave:**

If during the time frame of **July 1<sup>st</sup>, 2022 to December 31<sup>st</sup>, 2022** the resident must:

- ✓ Submit a TTUHSC Resident Leave Request Form;

#### **OR**

If during the time frame of **January 1<sup>st</sup>, 2023 to July 2<sup>nd</sup>, 2023** the resident must:

- ✓ Submit a TTUHSC Resident Leave Request Form

#### **PLUS**

- ✓ Complete the "TTUHSC Exempt Employee Leave Report" for the appropriate month for all vacation leave within WebRaider\*\* no later than the 15<sup>th</sup> of the following month.

#### **If Submitting for Sick Leave:**

- ✓ Submit a TTUHSC Resident Leave Request Form **AND**
- ✓ Complete the "TTUHSC Exempt Employee Leave Report" for the appropriate month for all sick leave within WebRaider\*\* no later than the 15<sup>th</sup> of the following month.

#### **If Submitting for Professional Leave:**

- ✓ All residents must submit a TTUHSC Resident Leave Request Form (**ONLY**).

### For SECOND-YEAR (as a TTUHSC employee) TTUHSC-paid residents:

*PGY2 Pharmacotherapy (Amarillo & Lubbock)*

#### **If Submitting for Vacation and/or Sick Leave:**

- ✓ Submit a TTUHSC Resident Leave Request Form **AND**
- ✓ Complete the "TTUHSC Exempt Employee Leave Report" for the appropriate month for all vacation and/or sick leave within WebRaider\*\* no later than the 15<sup>th</sup> of the following month.

#### **If Submitting for Professional Leave:**

- ✓ All residents must submit a TTUHSC Resident Leave Request Form (**ONLY**).

## NOTES:

\*\*WebRaider instructions will be sent to you via email.

For Other Leave, please contact your local HR office or Dena Hair