

**FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT  
APPLICATION FOR CLASSIFIED STAFF DEVELOPMENT LEAVE**

For details, see Article 8.4 of the Agreement between the Board of Trustees and CSEA, Unit A; Article 10.13 of the Agreement between the Board of Trustees and SEIU, Local 715, Unit 1; Article 8.M of the Agreement between the Board of Trustees and Teamsters, Local 287, Supervisors or Chapter 7 of the Confidential Handbook.

Name \_\_\_\_\_

Date of first employment as a contract employee \_\_\_\_\_

Date of most recent Staff Development Leave \_\_\_\_\_

Length of leave requested \_\_\_\_\_ months. \_\_\_\_\_

I request a Staff Development Leave from my position as \_\_\_\_\_  
job title

from \_\_\_\_\_ through \_\_\_\_\_  
starting date ending date

I plan to use this Staff Development Leave, if granted by the Board of Trustees, to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you plan to enroll in school, give the name of the school, a list of courses with course descriptions by academic term and the number of units of credit for each. Use the attached activity summary page for this purpose.

I believe this Staff Development Leave activity will benefit my development as a District employee and, consequently, the District by accomplishing the following objectives:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional comments or details about leave activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Summary Page Completed

\_\_\_\_\_  
Date Applicant's Signature

**Staff Development Leave Activity Summary**

Name of School \_\_\_\_\_

1st Quarter (or Semester)

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

| <u>Course Title</u> | <u>Units</u> | <u>Non-course work Activities</u> |
|---------------------|--------------|-----------------------------------|
| _____               | _____        | _____                             |
| _____               | _____        | _____                             |
| _____               | _____        | _____                             |

2nd Quarter (or Semester)

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

| <u>Course Title</u> | <u>Units</u> | <u>Non-course work Activities</u> |
|---------------------|--------------|-----------------------------------|
| _____               | _____        | _____                             |
| _____               | _____        | _____                             |
| _____               | _____        | _____                             |

3rd Quarter (or Semester)

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

| <u>Course Title</u> | <u>Units</u> | <u>Non-course work Activities</u> |
|---------------------|--------------|-----------------------------------|
| _____               | _____        | _____                             |
| _____               | _____        | _____                             |
| _____               | _____        | _____                             |

Attach course descriptions.  
(Attach additional pages if necessary)

**Staff Development Leave Activity Summary**  
(continued)

Administrator's recommendation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Administrator's Signature \_\_\_\_\_

Date \_\_\_\_\_ President's/Chancellor's Signature \_\_\_\_\_

Committee's recommendation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

**Conditions of Leave Approval**

Reporting requirements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Deliverables: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other: \_\_\_\_\_  
\_\_\_\_\_

Board Approval \_\_\_\_\_ Denial \_\_\_\_\_ Date \_\_\_\_\_

Date Received in District Personnel \_\_\_\_\_ Processed by \_\_\_\_\_