



## LEAVES OF ABSENCE

No: SAAP 7-8

**Authority:** UWM Administration and  
UWS Board of Regents Policy 89-9  
as amended by Regents Resolution 8457  
(See also SAAP 7-11)

**Date:** February 1, 2002-Rev(3)  
February 1992-Rev.(2)  
(Original, February 9, 1981)

**Initiator:** Provost  
Vice Chancellor of Finance & Administrative Affairs

**Responsible Party:** Provost

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A. DEFINITION:

A leave of absence is a temporary separation of an unclassified employee from the university during which that person is not paid from the funds administered by the university other than those permitted by state regulations.

B. ELIGIBILITY:

Unpaid leave of absence not covered by sick leave or sabbatical leave may be granted to unclassified employees for a specific legitimate purpose pursuant to this policy or policy SAAP 7-11.

An employee who accepts other than a temporary position (for example, a regular faculty or administrative appointment at another institution or organization) will not be granted a leave of absence.

C. APPROVAL PROCESS:

A leave of absence may not be taken by a faculty member without the approval of the department executive committee, the dean of the respective school, and the chancellor. A leave of absence may not be taken by an academic staff member without approval of the appropriate administrative supervisor, the division head, and the chancellor.

The presumption in the approval process is that a leave usually will be granted if sufficient prior notification (for example, 90 days) is provided. However, shorter notification or denial of leave may occur if circumstances press such actions on the relevant parties.

D. GENERAL POLICY PROVISIONS FOR ALL LEAVES OTHER THAN MEDICAL:

1. A leave of absence must be for a specific period of time. It cannot be open-ended.
2. Initial leaves of one year or less (subject to a discretionary extension for a second year) or for the initial term of an elected or appointed government office not to exceed four years, may be approved as provided herein and/or in SAAP 7-11. A discretionary leave extension must be applied for and approved according to the same procedures as an initial leave request.

3. Any extension for a third year must receive specific approval of the UW System President (See Regents Policy 89-9)
4. For any leave extension beyond the third year or other than an initial term of elected or appointed government office of up to four years, advance approval by the Board of Regents is required (See Regent Policy 89-9).
5. All leaves of absence are predicated on an agreement between the staff member and the university that the staff member will return to the university at the conclusion of the leave. Each staff member requesting a leave must execute a conditional resignation as shown on SAAP 7-8, Exhibit 1, stipulating that failure to return to the university at the conclusion of the approved leave period constitutes a resignation from the university.

E. POLICY FOR EMPLOYEES ENGAGING IN POLITICAL ACTIVITY OR SEEKING ELECTIVE OFFICE. (See SAAP 7-11)

F. PAY RAISES:

Unclassified employees taking unpaid leaves of absence will be eligible for across-the-board and merit raises but the raises will not be implemented until they return.

G. PROBATIONARY PERIOD:

Faculty on leave of absence will have the period of absence excluded in calculating the probationary period (5.13(4), UWM Policies and Procedures).

Any leave of absence which reduces a probationary academic staff appointment below 50% time is excluded in calculating the probationary period (104.03, Academic Staff Personnel Policies and Procedures).

H. CONTINUATION OF FRINGE BENEFITS:

Premiums continue at the same state/employee shares except as noted for health insurance and income continuation insurance. Any benefit not prepaid for the duration of the leave must be applied for within 30 days of return to the payroll. Unclassified employees taking an unpaid leave of absence may be eligible for the following benefits. (These benefits are subject to change. Employees are responsible for obtaining up-to-date information from the Benefits Office.)

1. Health Insurance

The university continues to contribute toward the payment of health insurance for the first three months of the leave of absence. All subsequent premiums must be paid by the unclassified employee for the duration of the leave.

2. Income Continuation Insurance

The state continues to contribute toward the payment of income continuation insurance for the first three months of the leave of absence. All subsequent premiums must be paid in full by the unclassified employee for the duration of the leave.

3. State Group Life Insurance

The state continues to contribute to the premiums for three years.

4. Sick Leave and Vacation

Sick leave and vacation days are not accumulated during a leave of absence.

5. Retirement

The period of the leave of absence is excluded in the calculation of years of creditable service; however, a full-year's credit is earned after 7.5 months of full pay.

The university ceases to contribute toward retirement for the duration of the leave.

I. JOB RIGHTS:

Unclassified staff on a leave have the same job rights as someone not on leave with respect to job continuation in case of layoffs, except that years of service are not accumulated during a leave.

Form Letter  
Approval of Leave of Absence

TO: Faculty Member or Academic Staff

FROM: Dean or Division Head

SUBJECT: Leave of Absence

Upon the recommendations of \_\_\_\_\_ [and your executive committee (if applicable)], the Chancellor has approved your request [for a] **OR** [to extend your] (strike one) leave of absence subject to your acceptance of the terms of the leave which are as follows:

1. The period of the leave is \_\_\_% from \_\_\_\_\_ to \_\_\_\_\_ .  
(date) (date)
2. [Your salary for that period will be\_\_\_\_\_.] **OR** [Your leave will be without pay]. (strike one)
3. You will contact the Benefits Office to take any steps necessary if you wish to continue your fringe benefit coverage.
4. Your failure to return to the University at the conclusion of the approved leave period indicated above constitutes your resignation from the University.

Please indicate below your acceptance of these conditions and return this letter to me by \_\_\_\_\_ (date) \_\_\_\_\_. A copy of this letter is enclosed for your records.

I agree to the conditions as stated above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Type Name)

\_\_\_\_\_  
Signature  
Dean or Division Head