



Resident Leave Application – Department of Pathology and Laboratory Medicine

Name: \_\_\_\_\_ Number of Days: \_\_\_\_\_

Dates requested: \_\_\_\_\_ Rotation: \_\_\_\_\_

Type of Leave:

- Vacation / "Annual Leave"
- Educational: Conference/Activity \_\_\_\_\_
- Sick Leave
- Other: Bereavement / Jury Duty / Other (please circle, describe "other")

Clinical Duties will be covered by: (signature requested)

\_\_\_\_\_ (or N/A )

Teaching assignments will be covered by: (signature requested)

\_\_\_\_\_ (or N/A )

Date of Request: \_\_\_\_\_ Resident Signature: \_\_\_\_\_

Approved by:

\_\_\_\_\_  
Rotation Director

\_\_\_\_\_  
\*if VAMC rotation, VA Site Director

\_\_\_\_\_  
Chief Resident

\_\_\_\_\_  
Program Director

Residents may take up to 15 annual leave days, 5 educational leave days, and 15 sick days per year. Residents do not receive pay for unused leave.

Completed forms go to Program Coordinator.