Astronomy Unit, School of Physics and Astronomy: Staff & PGR Students Authorised Absence (Part A) and Annual Leave (Part B)

Name:								
Manager/Supervisor:								
101,11								
PART A: PAID	AUTHO	RISED ABSEN	ICE (L	ESS THAN O	NE MONTH)			
					•		efore completing this	form.
Students should	discuss			ipervisor befo	ore completing			,
From:		,	То:	D:		Number of working days:		
Activity								
(and personal								
contribution, eg talk, poster)								
Contact						Tel no:		
details						1011101		
	0.00	FLIND	INIC					
ESTIMATED CO	0515	FUND Source			1			
Travel:				Amount	Cuanti			
	Subsistence:		rant		Grant:			
Other:			nal		Source:			
Total: Sch			l					
	nual lea	ve must also b	e mad	e on the MyH			information as below	,
From:	To:	To:			Number working days:			
research studer	mally mo nt superv	ake arrangeme vision, project s	nts to superv	cover duties i ision, adminis	including teach stration duties e	etc.	es, lectures, classes, m	narking,
Activity (Lectur	es, advising, P	, PGR students, exam boards etc)			Substitute			
			SIGN	NATURES			Date	
Applicant			SIGNATURES					$\overline{}$
Line Manager/S	Supervis	or						
Director, Astronomy Unit (for HoS)								