

Indiana University
Computer Science
School of Informatics, Computing, and Engineering

Parental Leave Request Form

This request should be made at least 30 Days in advance of the date on which you wish to start Parental Leave. Please submit completed and signed request along with birth certificate/hospital birth confirmation or custody/adoption order to Luddy Hall, 1113 or send to sicecsiu@indiana.edu

Part 1: to be completed by STUDENT

Is this your Initial Request or Revision of a Previous Request? _____

Are you requesting leave for a birth or adoption? _____

Name: _____ 10-Digit University ID: _____

Admit Term: _____ Advisor: _____ Current Term Credits: _____

SSA Assignment (RA or AI): _____ SSA Faculty Supervisor: _____

Anticipated Begin Date: _____ End Date: _____

CS Graduate Studies Office Use Only

Request approved? _____

If yes, plan to cover SAA responsibilities during leave:

Reason if Denied:

Director of Graduate Administration Signature: _____ Date: _____

Documentation required within 30 calendar days of birth or adoption date.

For a birth, documentation proving eligibility for Parental Leave (birth certificate or hospital birth confirmation) required.

For an adoption, documentation from a court, agency, and/or attorney (custody/adoption order) required.

Student Affirmation

I affirm that the information I have provided on this form is accurate and complete. I acknowledge that I have read and understand the Parental Leave information available to me on the IU School of Informatics, Computing, and Engineering website and I will provide the

Computer Science Graduate Studies Office documentation and information as may be requested.

Student Signature: _____

Date: _____

Submit completed and signed request along with birth certificate, hospital birth confirmation or custody/adoption order to Luddy Hall, Room 1113, 700 N Woodlawn Ave, Bloomington, IN 47408

Email: sicecsiu@indiana.edu.