

Office Use: Denied/Approved

Date:

AUTHORIZATION FOR EDUCATIONAL RELEASE TIME

I certify that I am a full-time non-faculty employee of the Board of Regents, and have been continuously employed by the state of South Dakota for one year in a full-time position.

I understand that for employees covered by the overtime provisions of the Fair Labor Standards Act, all hours over the three-clock hours limitation must be made up. I also understand that the three hours do not count as hours worked and will not be calculated toward overtime.

Employee Data

Employee Name: _____
(Last) (First) (M)

Banner ID: _____

Department & University Employed: _____

Full-time Hire Date: _____

Course Data

Semester: _____ Year: _____

Department/College: _____ Course Name: _____

Course Number: _____ Number of Credits: _____

Day or Days of Week: _____ Time of Class: _____

Signature Approval

Signature of Applicant: _____

Signature of Supervisor: _____

Signature of Division/Department Head: _____

****Please route to the appropriate leave-reporting department. SDBOR Public Universities and Special Schools are an Equal Employment Opportunity Employer.**