

**GRADUATE MEDICAL EDUCATION**

**SICK LEAVE POOL (EXTENDED LEAVE) REQUEST FORM**

Use of Sick Leave Pool is available for extended illness of the resident and may be used by individuals who are required to discontinue work because of medical needs. Such use may be allowed only after exhaustion of sick leave and annual leave, up to a maximum of 45 calendar days per individual, with the pre-approval of the Program Director and the GME Office. The use of the Sick Leave Pool is not available for uncomplicated maternity.

**House Officer Name:** \_\_\_\_\_ **GEMS ID:** \_\_\_\_\_  
**Program:** \_\_\_\_\_

Has all accrued annual & sick leave hours been utilized?       YES       NO

Date Form Prepared: \_\_\_\_\_

**Requested Dates:**    *(Maximum of 45 days)*  
From: \_\_\_\_\_ To: \_\_\_\_\_

**Rotation Schedule During Leave:** (List dates and affiliates from rotation schedule)  
\_\_\_\_\_  
\_\_\_\_\_

**Explanation of Leave:**  
\_\_\_\_\_  
\_\_\_\_\_

**APPROVALS:**

|   |               |
|---|---------------|
| _____<br>Program Director                                   | _____<br>Date |
| _____<br>Director, Graduate Medical Education               | _____<br>Date |
| _____<br>Sr. Associate Dean, Graduate Medical Education/DIO | _____<br>Date |

**Return to Hannah Ware, GME Office, [hannahf@usf.edu](mailto:hannahf@usf.edu)**

- Once Approved, Copies to:
- (1) Program Coordinator
  - (2) GME Office (Hannah Ware)