



UTLA RELEASE TIME REQUEST

This request must be received 5 days prior to the date requested and signed.

Please email to Jasmine Vaughn at jasmine.vaughn@utla.net and Gloria Martinez at gmartinez@utla.net

Name of UTLA member to be released

Employee No.

Home Address

Requested date/dates full day half day Substitute needed: Yes No

Chapter/Work Site

Chapter/Work Site SAA/Principal Name

Chapter/Work Address

Chapter/Work Site SAA/Principal Email

If this is a UTLA Chapter Chair Release, please specify reason below:

- Meeting(s) Organizing school/campaign Training(s)
- Other (be specific) _____

Specific purpose for release

Release requested by (Print Name) – Officer/Committee Chair/Area Chair (*Area Chair Requests – Section 1 must be completed*)

Release will be paid by: UTLA or Affiliate* (select one) AFT CFT CTA NEA

*Affiliate approval letter must be sent to Jasmine Vaughn for release to be processed

SECTION 1 – This section must be completed by the Area Chair if the release will be paid by Area Funds

Area (check one): N S E W VE VW H C

I _____ verify that this is an appropriate expense for the
Area Chair Name (Print)

designated purpose specified above.

Signature (Area Chair)

Date

Section 2 – To be completed by UTLA

Category/Budget Item: _____

Authorized by (UTLA Officer)

Date