College of Engineering
Employee Release Time Form

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Name _____

Employee ID _____

Department _____

Release Time Period _____

1

Begin Period	End Period	FAS#	Release Amount($)	%Effort

_____ _____ _____

Principal Investigator 2 Department Head -2 Contract Manager 3

_____ _____ _____

Date Date Date

_____

' If dollar amount was used in original budget, release time obligation will be converted to equivalent % effort.

2 Please refer to Department policy for the requirement of the Principal Investigator's signature and/or Department Head's signature.

3 Contract manager must sign, verifying the accuracy of this form.