Living Well Release Time Program Request Form

Instructions

- Review this form with your supervisor before submitting it.
- Read the Wellness Program Policy at https://go.uta.edu/hrbpo7.
- Submit this form at any time during the year. All forms expire August 31.
- You must submit a new form on September 1 to renew your request.
- Email completed forms to Jeremy Roden <u>iroden@uta.edu</u>.

About the Program

- Up to 1.5 hours of release time may be granted each week to full-time employees for participation in physical activities on the UTA campus.
- The time must be spent in physical activities, a structured Campus Recreation program, or an educational class.
- Participants may take 30 minutes, three times per week and must contribute equal amounts of their own time.
- Time may not be split or carried over from one day to another.
- Abuse or misuse of release time may lead to disciplinary action, including termination.
- Adherence to the fiscal regulations, procedures, and guidelines in accordance with the Wellness Program Policy are the responsibility of the participant and their supervisor.

Employee Attestation

I understand the policy and release the University from liability for any injury or accident that may occur as a result of my participation in the program.

| Name | Signature | | Date | |
|------------------------------|---------------------------------|------------------|------------------------------|----------|
| Department | | | Faculty | Staff |
| Phone | | Email | | |
| Supervisor Attestation | on | | | |
| I have reviewed the Wellness | Program Policy with my employed | e and grant perm | ission to participate in the | program. |
| Name | Signature | | Date | |