

UNIVERSITY OF HOUSTON-CLEAR LAKE
Staff Fitness Release Time Application

University guidelines for application for the Fitness Release Time program provide for time off without a reduction in pay or benefits to a **maximum of three (3) hours per week**. This includes a combination of time off approved through the College Release Time, ESL or GED programs. The application must be approved in advance and must not interfere with operations of the employing department. Only Full-time, Benefits Eligible, Staff are eligible for Fitness Release Time. Supervisor reserves the right to change time requested or to decrease the amount of time approved due to operational considerations.

Application Instructions: Complete the application form and submit it to your supervisor prior to any time off. Take the approved form with you to Student Life to pay fees and to the Fitness Zone for signature. After obtaining all signatures, submit this form (with a copy of your fee receipt) to the Office of Human Resources. **You are encouraged to do a pre-assessment in the Fitness Zone before starting your program and at intervals throughout.**

Employee Name: _____ **FTE:** _____

Job Title: _____ **Empl Id:** _____

Department Name: _____ **Mail code:** _____

Please check the appropriate box.

I am a paid member of the Fitness Zone.

Fall Spring Summer Yearly (Aug-Aug : Jan-Jan) (circle one)

I am not a member of the Fitness Zone but have paid \$15.00 per semester (\$45.00 per year) to participate in the program.

Fall Spring Summer Yearly (Aug-Aug : Jan-Jan) (circle one)

Please describe the type of activity that you plan to participate in. (e.g. Yoga, aerobics, walking, etc.)

Please enter the amount of time requested per week. _____

Please enter the day(s) of the week requested. _____

Please enter the time of day requested. _____

Employee Signature

Date

Supervisor Signature

Date

Fitness Zone Signature

Date
