



To
TU Braunschweig
Abteilung 12
Attn: Frau Ekelhof

Special leave policy / conversion to half „days of care“ due to corona-related closures of daycare facilities and schools—exceptional application during the corona pandemic

A. Data of the Applicant

I hereby request that leave days be converted to half days of care due to corona-related daycare and school closings

Surname, First name:

Department/Institute:

Days of care from—to:

correspond to

days of leave

Detailed justification:

I confirm that

- the waiver of full days of leave and conversion to half days of care is in accordance with my express wishes and
- the use of the special leave policy is imperative due to my personal situation.

Please sign the German version!

Place, date

Signature of the applicant

B. Agreement by the supervisor

- I agree to the conversion to half days of care.
- I do **not** agree to the conversion to half days of care for the following reasons:

Place, date

Signature of the supervisor

C. Approval by the Personnel Department (Abteilung 12)

- I approve the conversion to half days of care.
- I do **not** approve the conversion to half days of care for the following reasons:

Place, date

Signature of the personnel administrator, Abteilung 12

D. Entry into the personal leave form

- The days of care were noted in the personal leave form.

Place, date

Signature of the leave administrator
Department/Unit

This is a courtesy translation. If there are any differences in the wording, meaning, or interpretation of the German and English versions, the German version shall prevail.