

**NATIONAL TAIWAN UNIVERSITY**  
**Faculty Member Position Reinstatement Notification**

Date: \_\_\_\_\_ (yyyy/mm/dd)

Job title		Name (please sign)	
Holding adjunct administrative positions			
Reason for applying for unpaid leave	<input type="checkbox"/> Parental leave <input type="checkbox"/> Leave to attend to a relative <input type="checkbox"/> Other (please specify: _____ )		
Approved period of unpaid leave	From _____ (yyyy/mm/dd) to _____ (yyyy/mm/dd)		
Date of reinstatement	_____ (yyyy/mm/dd) ※Reinstated on the day following the last day of the period of unpaid leave		
Remarks			
Approval stamp of the unit head: _____			

Notes:

1. Faculty members shall complete this form and submit it to the Personnel Office (or the Personnel Division, College of Medicine) for reinstatement to their position at least 20 days prior to the end of their unpaid leave period to ensure that all relevant units are properly notified.
2. Faculty members who applied for unpaid leave due to travel abroad shall fill out the document “Notification of Faculty Member Return to Taiwan” instead of this form.