



Staff Volunteering Line Manager Permission Form

Employee/Volunteer Name:

Department:

Role:

Part Time

Full Time

Are you directly employed by the University i.e. permanent or on a fixed term contract?

Yes

No

End date of fixed term contract if applicable:

Contact Telephone No:

Email:

Line Manager Name and role:

Line Managers email:

**I confirm that I have authorised this application for the above employee to
month maximum) period, subject to the following constraints (Line manager to
set out any constraints such as particular times when the employee cannot be
released for volunteering due to workload)**

Line Manager Signature:

Date