**TEACHER ABSENCE REQUEST**

A faculty member unable to meet a scheduled class for any reason should complete this form, obtain department chair approval and signature, and submit it to the office of the dean who will then send the form to Human Resources and the Office of Academic Affairs. All non-illness absences must have the chair’s approval. Except in an emergency, the form should reach the office of the dean at least three days prior to the absence.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will be absent from the campus beginning at (hour) \_\_\_\_\_\_\_\_\_\_\_\_ on (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and ending at (hour) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ on (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the purpose of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at (city) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (state) \_\_\_\_\_\_\_\_.

Arrangements have been made to take care of all classes as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Class** | **Hour** | **Date** | **Person in Charge** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Has an official travel request been filed for this absence? If the reason for the absence is professional business, attending conference, workshop, etc. (whether university funds are being provided or not) an official travel request should document the absence. \_\_\_YES \_\_\_NO
2. Is this absence necessitated by jury duty? \_\_\_YES \_\_\_NO
3. Is the absence necessitated by illness or related health issues? \_\_\_YES \_\_\_NO

Date of Submission \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instructor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved

Department Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Campus Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Approved

 ( ) Disapproved

 ( ) Held

 ( ) Conference Requested

Approved

Dean of School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_