

Request for Temporary Absence

Name: _____

Type of Absence:

Sick Leave

Reason: _____ Date(s): _____

Disposition of Classes: _____

Personal Emergency (This may include a family emergency, death in the family, etc. A personal emergency does NOT include the following -- time conflicts with internships, off-campus jobs, or extending holiday breaks &/or conference breaks)

Reason: _____ Date(s): _____

Disposition of Classes: _____

Conference/Professional Meeting (including Tournaments)

Place of Meeting _____ Date(s): _____

Disposition of Classes: _____

TA Signature _____ Date: _____

Supervisor Signature: _____ Date: _____

Department Chair Signature: _____ Date: _____

When physically possible, this form must be submitted prior to your absence.