# THIS FORM FOR DEPARTMENTAL USE ONLY

## Notice of Absence from Class/Class Cancellation \*

**Absence from class for *any* reason should be reported on this form.** Absence from class for reasons other than illness or emergency requires ***prior*** permission from the Department Chair. Informal voluntary substitution by a University colleague is permissible, but requires prior permission from the Chair. Classes should be canceled only in exceptional circumstances, and normally appropriate alternative assignments/activities should be provided.

Please complete the following information and submit this form to the Department Chair as early as possible before the anticipated absence from class, if absence was due to illness or emergency (or as soon thereafter as possible).

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date(s) of Absence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Reason for Absence**

**Arrangement for Class(es) Missed (Name of Substitute *OR* Alternative Assignments/Activities, if applicable):**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Received by Chair (Signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\* This form is *not* required for use of personal holiday that is taken upon mutual agreement of the faculty member and appropriate administrator. In cases of absence involving University-related travel, this form is not a substitute for the standard travel authorization form.**

**As of July, 2013**