

FACULTY and ACADEMIC STAFF ABSENCE FORM

This form must be completed prior to absence from the university and submitted to the Office of the Dean after Administrative approval is obtained.

1. Name: _____

2. Dates of Planned Leave: _____

3. Reason for Absence (Check all that apply):

- a. Professional Responsibility
 - 1. Professional Meeting
 - 2. Presentation
 - 3. Consultation
 - 4. Peer Review
 - 5. Teaching/Research/Practice assignment related travel
- b. Illness
- c. Vacation (Annual Appointment Only)
- d. Work Outside the University
- e. Other

4. Contact Information during Period of Absence _____

5. How will your responsibilities in Teaching, Research, Service, Practice &/or Administrative Duties be covered during the period of absence?

Teaching _____

Research/Creative _____

Service _____

Practice _____

Administrative Duties _____

Signed _____ Date _____

Approved by _____ Date _____