



GLENVILLE STATE COLLEGE

FACULTY REPORT OF ABSENCE OR REQUEST TO BE ABSENT FROM DUTY (AA 11/10)

I _____ request permission for absence from duties on the following date(s): _____

Indicate reason for absence:

- Off-campus College Event Professional Conference/Meeting Personal

Explain absence: _____

Classes/Responsibilities Missed

Disposition of Each (please be specific)

_____	_____
_____	_____
_____	_____
_____	_____

If the absence is for professional reasons, please provide the following information:

Destination: _____

Mode of Travel: _____

Contact Information: _____

Faculty Signature: _____

- Recommended Not recommended

Chairperson: _____

- Approved Not approved

_____ Date

Provost: _____

_____ Date