

## FACULTY REPORT OF ABSENCE OR REQUEST TO BE ABSENT FROM DUTY

(AA-6/6/2023)

Faculty Member:	Date:
I (report) (request permission for) abser	nce from the duties on the following dates:
Indicate reason for absence:  Note: Personal reasons are tho	□ Personal □ University Duties se not related to University duties (Illness, Death in family, etc.)
Explain absence:	
Classes/Responsibilities Missed:	Disposition of Each: (Please be specific)
If reason stated above is for University	duties, please complete the following:
Destination:	
Mode of Travel:	
	vehicle:
Estimated cost of meals and room:	
	d does not imply approval of funds unless specifically noted with funding isted and/or notification of the approval attached.
Chairperson:	Date:
Provost	Date: