

## FACULTY ADVANCE NOTICE OF ABSENCE

This form must be filled out and filed in the office of the Dean of Academic Affairs prior to the date  
of absence from the campus.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Reason for Absence:

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

Phone Number where you can be reached in case of emergency: \_\_\_\_\_

Arrangements for classes and/or other responsibilities:

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Faculty Signature: \_\_\_\_\_

Academic Dean: \_\_\_\_\_      Approved    Denied