AUSTIN PEAY STATE UNIVERSITY FACULTY ABSENCE FORM

This form should be completed and presented for approval <u>before</u> the date of the anticipated absence, whenever possible. Unanticipated absence (i.e., illness) should be reported promptly after the fact. Both require the approval of the chairperson or supervisor and the dean or director.

PLEASE CHECK ONE: Request for Absence	Report of Absence
Name: [Department/Division
Date(s) of Absence	Number of Working Hours
(a) Nature of Absence: Sick Leave	Annual Leave Institutional Leave
(b) Reason for Absence: (Not Required for Annua	al Leave)
Arrangements for taking care of classes or other of	luties:
Date Submitted	SIGNATURES:
	Faculty Member
	Chairperson/Supervisor
	Dean/Director

NOTES:

- 1. Sick Leave Absence due to personal illness, personal injury, medical or dental examinations, exposure to contagious disease, and illness or death of family members.
- 2. Nine-month academic personnel, full or part-time, whether or not compensated over a twelve-month period, <u>shall not</u> be eligible for annual leave.
- 3. Institutional Leave Absence from regularly scheduled activities to attend University-related meetings or activities off-campus.