

## REQUEST FOR EXTENDED CLASS ABSENCE NOTIFICATION

This form must be submitted with documentation to Student Ombudsperson Services (S.O.S.) **no later than five business days following the absence.**  
Requests will not be accepted after the last day of classes.

The Office of the Chief Student Affairs Officer or designee will provide class absence notification to professors if a student misses **at least one consecutive week of courses** (i.e. Monday, Wednesday, Friday; Tuesday and Thursday.) due to physical or mental illness; physical or mental illness of immediate family member; and death of immediate family member. "Immediate family" is defined as parents, spouse, children, brother or sister, grandparents, or any relative living in the household of the student. Stepparents, stepchildren, and stepsiblings are included in the definition of "immediate family." The student must submit the request and appropriate documentation to the Office of Student Ombudsperson Services (S.O.S.) within **five business days** following the absence. **Please note that Request for Extended Class Absence Notification will not be accepted after the last day of classes.**

**NOTE:** Students should not come to the Office of Student Ombudsperson Services for absences of less than one week. In the case of brief, self-limiting illnesses (i.e. Colds, minor sore throats, etc.), it is the student's responsibility to notify instructors of illnesses and make arrangements regarding missed assignments.

Student Name: \_\_\_\_\_  
Last First Middle

University ID No (UIN): \_\_\_\_\_ ODU Email Address: \_\_\_\_\_

Current Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
Street Address

City State Zip Code

Dates of absence(s): \_\_\_\_\_

Reason for absence(s): Please attach copies of documentation, e.g. doctor's note, obituary, etc.

- ☐ Extended periods (at least one consecutive week) of physical or mental illness
- ☐ Extended periods (at least one consecutive week) of physical or mental illness of immediate family member
- ☐ Death of immediate family member
- ☐ Other: Please explain \_\_\_\_\_  
\_\_\_\_\_

Student's Signature: (required) \_\_\_\_\_ Date: \_\_\_\_\_

*Disclaimer: When the Student Ombudsperson Services Office agrees to issue absence notices, these notices do not "excuse" the absence, nor do they guarantee that the student will be permitted to make up tests or other missed assignments. The absence notice simply documents that the student's illness or other circumstances indicate that the student is/was unable to participate in class for the designated period of time. **Excused absences and academic accommodations are made at the discretion of the instructor.***