

FACULTY REQUEST FOR CAMPUS LEAVE FORM

Faculty's Name:

Faculty's Signature: _____

Department:

Chair:

I request official permission to be absent from campus during the dates/times listed below:

Beginning Date and Time AM
 PM

Ending Date and Time AM
 PM

Reason for Absence:

Official Business Concerning:

"All official business absences should have attached to this form a Request for Travel Authorization form: ["http://www.uncfsu.edu/comptrol/forms.htm"](http://www.uncfsu.edu/comptrol/forms.htm) and official documentation on the activity. If you are requesting money, all supporting additional documentation for the expenses must be attached."

Funded By: Title III Other

(Source of Funding)

Community Service/Civil Leave: ["http://www.uncfsu.edu/humres/leavestatus.htm#Civil%20Leave"](http://www.uncfsu.edu/humres/leavestatus.htm#Civil%20Leave)

Please Explain

Sick Absence

Please Explain

(Requests for sick leave must have FMLA documentation from HR attached to this form. Faculty do not accrue sick leave ["http://www.uncfsu.edu/humres/leavestatus.htm#Family%20Medical%20Leave"](http://www.uncfsu.edu/humres/leavestatus.htm#Family%20Medical%20Leave))

The following are a list of my classes and the arrangements I have made to meet the students' needs:

<p>Course Name <input type="text"/> Online: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Substitute Name <input type="text"/></p> <p>Substitute Signature: _____</p>	<p>How will the course content be delivered?</p> <input type="text"/>
<p>Course Name <input type="text"/> Online: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Substitute Name <input type="text"/></p> <p>Substitute Signature: _____</p>	<p>How will the course content be delivered?</p> <input type="text"/>
<p>Course Name <input type="text"/> Online: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Substitute Name <input type="text"/></p> <p>Substitute Signature: _____</p>	<p>How will the course content be delivered?</p> <input type="text"/>
<p>Course Name <input type="text"/> Online: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Substitute Name <input type="text"/></p> <p>Substitute Signature: _____</p>	<p>How will the course content be delivered?</p> <input type="text"/>

Approved

Disapproved

Signature of the Department Chair _____

Approved

Disapproved

Signature of College Dean: _____