

Winthrop University
Richard W. Riley College of Education

Request for Absence from Duties (other than approved travel)
For absences of three (3) days or more, contact Human Resources

Date: _____ Name: _____

Department: _____ Date(s) of absence: _____

Purpose of absence

Classes/lessons to be missed

How will they be covered?

Other faculty responsibilities, such as advising, meetings, etc. to be missed

Faculty Member Signature

Approved:

Department Chair