

**Faculty Absence Request Form**  
**College of Fine Arts, Western Michigan University**

This form must be completed, submitted to the Department Chair/Director, and signed by the Department Chair/Director before a faculty member commences a planned absence.

For unplanned absences, please complete upon your return and submit to your department's timekeeper.

**Date:**

**Name:**

**Dates of Absence:**

**Reason for Absence:**      Sick Leave      Funeral Leave      Necessity Leave      Annual Leave (Fiscal Year Faculty)  
   Professional Development      Creative Activity/Research      Conference

**If you are attending a conference or creative activity, please provide additional information, including your role (i.e. presenting or attending), your level of participation, and the name and location of the event.**

**Can you be reached by phone?**

**Can you be reached by WMU email while away?**

**If so, please provide a phone number:**

**Do you plan to place an "away" message on your WMU email and voicemail?**

**Instructional Responsibilities:** please list any classes/rehearsals missed during this absence. Describe how instructional goals of the course(s)/rehearsal(s) were or will be covered (or cancelled) during your absence.

**Date(s) Time(s)**

**Course #(s)/Rehearsal(s)**

**How will your classes be covered?**

**The request is approved.**

**The request is not approved based on the following rationale:**

**Department Chair/Director Signature**

(My typed name serves as my signature when submitted as an email attachment.)

Please refer to Article 27, Leaves of Absence, in the current [WMU/AAUP Agreement](#)