

THE UNIVERSITY OF MICHIGAN SCHOOL OF NURSING

Report of Temporary Absence

This report is made in conformity with the Bylaws of the Board of Regents, Section 5.16, which reads as follows: "All absences of members of the teaching staff or other academic employees shall be reported to the dean or director. All absences extending over more than three weeks at any one time must be reported to the provost and vice president for academic affairs or, at the University of Michigan-Dearborn and the University of Michigan-Flint, to the chancellor."

FACULTY: Submit this form (original and 1 copy) to your Director for pre-approval. Your Director will forward the original to the Dean's Office for final approval, who will then forward to the Office of Business & Financial Affairs (Rm. 1349 SNB) for appropriate processing. Retain a copy for your own file.

DIRECTORS: Submit the original of this form to the Dean's Office for approval and retain a copy in your area files.

NAME: _____ **UNIT:** _____

*I will be absent on the dates listed and for the reasons listed below:**

<u>Dates Absent</u> <u>(Give Inclusive Dates)</u>	<u>Total Number of Days</u>	<u>Reason(s) for Absence*</u>

Requestor signature: _____

Director's signature: _____

Dean's signature: _____

Date: _____

*** Reasons for Absence:**

Illness- State whether hospitalized and duration

Vacation- One week's vacation is considered a five-day interval (i.e., Monday-Friday)

Travel- Please indicate purpose of the trip. This will also provide a record for University travel insurance.