University of Wisconsin-La Crosse
Campus Absence Form

For protection of all concerned, file this form when any one of the following apply:

1) if some or all of the expense is to be paid with State funds;
2) if a University vehicle is to be used for travel;
3) if any of the reason for the absence is related to official business of the University.

Routine daily assignments requiring travel/absences from campus do not need this form.

NAME: DEPARTMENT:

PURPOSE OF PROPOSED ABSENCE:

DURATION OF ABSENCE (DATES):

ADDRESS/PHONE AT WHICH ABSENTEE CAN BE REACHED:

ARRANGEMENTS have been made as follows for classes and other responsibilities during off-campus period. (List each class or other assignment to be missed and indicate specific arrangements made.)

Course No. & Title	Hour	Days of Week	Arrangements

Source of funds for travel and other expense: University ☐ Other ☐
If University funds, indicate estimated amount:

Mode of travel: Train ☐ Plane ☐ Auto-Private ☐ Auto-University ☐

Date: Signature:

ACTION ON REQUEST

Action _____ _____
(Signature of Dept. Chair or Supervisor)

Date _____

THIS FORM SHOULD BE FILED AT LEAST ONE WEEK IN ADVANCE OF PROPOSED ABSENCE WHENEVER POSSIBLE.

COMPLETED FORMS ARE TO BE KEPT IN THE DEPARTMENT FILES.

Revised 1/2004