UNL DEPARTMENT OF CHEMISTRY FACULTY / INSTRUCTOR ABSENCE NOTIFICATION FORM

Please turn in completed form to the Chair's Office prior to the absence.

Name:

Date Submitted:		
Reason for Absence:	☐ Professional	
	☐ Personal	
	☐ Combination of Professional and Personal	
		u u
Date(s) of Absence:		
Contact Information:		(In case of an emergency, where can you be reached?)
	ne Number(s):	
Email Address(s):		
Class Arrangements:	☐ Not Applicable	
		T
	Course #	Instructor during Absence:
	\Box The follow	wing arrangements have been made for sections missed:
		- C - C - J
Signature:		