MILES COLLEGE
REQUEST FOR OFFICIAL PROFESSIONAL ABSENCE

I, _____ request to be absent from my assigned duties

In the _____ Division (Department) as described below:

DATE: FROM _____ TO _____

PURPOSE:

( ) To attend a professional meeting _____

Name

( ) To participate in a professional meeting _____

Name

( ) Other _____

(Describe briefly)

PLACE _____

Disposition of classes. (Planning for absences should provide for some kind of on-going learning activities). Please submit request for approval before departure. No more than two persons from a Division should depart for a meeting at the same time.

CLASS	Day	Time	Class Activity
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signed _____

ACTION:

Division Chairperson

( ) Approved ( ) Disapproved _____ _____

Signature Date

Dean of the College

( ) Approved ( ) Disapproved _____ _____

Signature Date

Revised 3/01