PURDUE UNIVERSITY TEACHER EDUCATION PROGRAM Sep-05

REQUEST FOR ABSENCE FROM STUDENT TEACHING

Student Teacher: Complete Sections 1 and 2, then sign and route the form for approval (Section 3).

Section 1. COMPLETED BY STUDENT TEACHER (Please print or type all information.)

A. Name: _____ **D. Semester:** _____

B. Program Area: _____ **E. Cooperating Teacher:** _____

C. Assigned School: _____ **F. Principal:** _____

G. Type of Absence:

☐ Personal Reasons (Including professional development; complete this form and obtain approval *prior* to planned absence.)

☐ Illness (Notify your cooperating teacher and principal immediately. Complete this form and obtain approval upon return to student teaching duties.)

☐ Bereavement: Immediate family (Notify your cooperating teacher and principal immediately. Complete this form and obtain approval upon return to student teaching duties. Specify the relationship of the deceased in Section 2.)

H. Days Absent:

First Day: _____ through Last Day: _____

MM/DD/YY MM/DD/YY

Number of Student Teaching Days Missed During **THIS** Absence: _____

Number of Student Teaching Days Missed **PREVIOUS TO** This Absence: _____

Total Number of Days Absent This Semester: _____ *

***IMPORTANT**: If this number is 4 or higher, the approval of the Associate Dean for Learning and Engagement is required.

Section 2. Provide an explanation for your absence here. Include a description of your plan to make up your absence. (Attach additional pages as needed.)

Section 3. SIGNATURES

Student Teacher:			**RECEIVED OFFICE OF FIELD EXPERIENCES** Purdue University
	Signature	Date	
Cooperating Teacher:			
	Signature	Date	
Principal (or designee):			
	Signature	Date	
University Supervisor:			
	Signature (or attach email approval)	Date	_____
Instructor of Record:			
	Signature (or attach email approval)	Date	Not valid unless dated by OFE
*Associate Dean:			
	Signature	Date	

Once this form has been completed, please hand-deliver or mail to Purdue University, Office of Field Experiences, BRNG 3241, 100 N. University St., West Lafayette, IN 47907-2098