

Leave of Absence from Student Teaching Form

Approval for a planned absence must be made 48 hours prior to the absence with approval from both the Cooperating Teacher and University Supervisor. This form is to be submitted to your Cooperating Teacher and University Supervisor as soon as possible following an absence.

Leave to be granted to: _____

Today's date: _____

Dates and times of leave: _____

Reason for leave: (Check those that apply)

____ Sick Leave

____ Bereavement

____ Emergency. Specify: _____

____ Approved professional development. Specify: _____

____ Other. Specify: _____

Absences will not be approved unless all signatures are included. Some absences may require students to make up days. A copy will be provided to the Director of Student Teaching.'

Signed: _____
Teacher Candidate

Signed: _____
Cooperating Teacher

Signed: _____
University Supervisor