Western Carolina University
School of Music
Faculty Request to be Absent from Teaching Duties

Instructions: please fill out this form at least one week in advance of your absence.

Name:	**Dates of Absence:**
Purpose of Trip: _____Recruiting ____Off-campus performance _____Other **Brief Explanation:**	

Class(es) to be Missed:	**Brief explanation of how these classes are to be covered:**

____Approved _____ _____
Department Head Signature Date

Comments:

Distribution: original to instructor's personnel file, copy to instructor

Professional Training for Tomorrow's Musicians