ADJUNCT FACULTY ABSENCE REPORT

NAME: _____ Period Ending 23rd of _____, 20_____

LAST 4 SSN# _____ DISCIPLINE: (Engl, Bio, Auto, Counsl, etc.) _____

Paid by timesheet? If yes, complete and attach this form to your timesheet; if you want to be paid and you have sufficient leave credits, you must notate your missed hours with reason on timesheet.

If paid by Unit of Pay method (lump sums), submit completed absence form to Dean's office by end of month

Absence Dates	# Hrs	check Absence Reason	Section #	Class Name	Who was your sub?	Mark X If no sub
		__S __PN __ B __JS __C				
		__S __PN __ B __JS __C				
		__S __PN __ B __JS __C				
		__S __PN __ B __JS __C				
		__S __PN __ B __JS __C				

Reasons: Refer to Agreement Article 8 for details –absences paid if you have available accrued leave

01 **(S)** personal illness
40 **(PN)** personal necessity (up to 1/2 of current semester accrual)
81 **(B)** bereavement (up to 4 consecutive days)
84 **(JS)** jury service (must attach court slip)
85 **(C)** approved conference

SIGNATURES:_____ _____ _____ _____

INSTRUCTOR DATE DEAN DATE

Note:_____ P:\1/29/2009 Absence Report Adjunct Faculty