

Formal Notice of Absence Form

(Personal Reasons)

Full Name:

Department/Class/Unit:

Supervisor/Instructor Name:

Contact Email:

Absence Start Date:

Absence End Date:

Reason for Absence (Personal):

E.g. Personal matters, medical appointment, family emergency...

Person in Charge During Absence (if applicable):

Signature:

Date Submitted:

[Submit Notice](#)

Note: Submitting this form does not guarantee approval. Please await official confirmation from your supervisor or HR/administration department.