



**Student Absence Notification Form**

**\*\*Official documentation required with form\*\***

Name(print): \_\_\_\_\_

EID#: \_\_\_\_\_

Local Address: \_\_\_\_\_

Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

On-campus employment location and contact:  
\_\_\_\_\_

Course Name (e.g. MAT 110)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

First Date of Absence \_\_\_\_\_ Anticipated Return Date \_\_\_\_\_

**Reason for Absence:**

- Medical Issue/Emergency
- Death in Family (indicate relationship) \_\_\_\_\_
- Personal Emergency

Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I understand that this absence notification does not automatically excuse my absence. It is my responsibility to contact each professor to ask what, if any, accommodations can be provided for the course time missed.*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return this form, the confidentiality waiver, and documentation by fax or email to:**

Dean of Students Office  
246B Student Center  
(734)487-1107, (734)481-0050 fax  
emu\_deanofstudents@emich.edu

