

**DEPARTMENT OF ART**

**APPLICATION FOR APPROVAL OF ABSENCE FROM CAMPUS**

**Term:** Fall\_\_ Winter\_\_ Spring\_\_ Summer\_\_

**Type of Leave Requested:** \_\_ Research Leave \_\_ Personal Reasons \_\_ Outside Employment

**Student's Name:**

**Period of Absence (including first and last day)** \_\_\_\_\_

**Number of Days:** \_\_\_\_\_

**Purpose and Destination:**

**Signature of Applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor's Comments:**

**Instructor's Approval (where applicable-Art 601, 603, 605, 699):**

**Graduate Executive Comments:**

**Graduate Coordinator:**

**Date:**

**Must be approved 3 weeks prior to absence and return to Graduate Program Administrator**