

## Report of Dismissal of a Class

All instructors are expected to meet at every assigned class time. However, should emergencies, such as an illness, an accident or a family crisis, prevent attendance; instructors must contact the Academic Affairs Office (925-8600) directly, as soon as possible in order to notify students of the canceled class. Non-emergency absences are permissible only with the Chair and Dean’s approval at least one week prior to the non-emergency absence.

Instructor’s Name: \_\_\_\_\_

Course: \_\_\_\_\_ Time/Days: \_\_\_\_\_

Type of Dismissal:

Emergency Dismissal of Class ..... ( )

**Please return to Della Willis in the Academic Office after filling out and signing**

Pre-approved Dismissal ..... ( )

Date class will be dismissed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason for class dismissal: \_\_\_\_\_

We strongly urge you to use one of the following strategies in making up a class period: identify a qualified substitute, hold an extra class at a mutually convenient time for you and your students, or assign additional materials, check one.

Substitute Instructor, Name: \_\_\_\_\_

Contact information: \_\_\_\_\_

Rescheduling of Class period

Assign additional homework

Other (explain) \_\_\_\_\_

How and/or when will your students make-up this class? Please attach or describe in detail the make-up assignments or activities the students will complete in your absence. \_\_\_\_\_

	Approval	Disapproval		
_____	____/____/____	____/____/____	( )	( )
Instructor’s Signature	Date			

	____/____/____	____/____/____	( )	( )
_____	Date			
Department Chair’s Signature				

	____/____/____	____/____/____	( )	( )
_____	Date			
Dean of Instruction’s Signature				