



APPEAL OF UNEXCUSED ABSENCES

Submit all of the following to the appropriate office within five (5) University business days from the date of the sixth (6th) absence. You may not accrue any additional absences during or after the appeal process.

- ❑ ***Appeal of Unexcused Absences* packet**
- ❑ **Typed letter explaining your absence/s and why you believe an appeal of should be granted**
- ❑ **Original documentation such as doctor's notes, obituaries, family emergency documentation**

Completed appeals can be submitted to the Appeals Advisor Morgan Hyman in **Drane Hall 217**

Appeal Decision Notification- The program Associate Director will e-mail you the decision of your Appeal. All notifications will be sent via your TTU e-mail address. Please make sure your correct e-mail is included in the appeal and a contact phone number should questions arise.



APPEAL OF UNEXCUSED ABSENCE FORM

Student Name: _____ Course and Section: _____

Dates of Absences:

Instructor	1	2	3	4	5	6	7	8	9	10

_____ **INITIALS** I understand that I am only allowed one appeal for an academic semester per course. If my appeal is approved by the Associate Director, I know that I will not be allowed to file another appeal.

Absence Documentation Provided (Please Check ALL that Apply)

☐

Doctor's Notes

☐

Death in the Immediate Family

☐

Family Emergency Documentation

☐

No Childcare

☐

Other (Please Specify) _____

Signature of Student

Student R#

Date

For Office Use Only:

Approved Not Approved

Associate Director Signature

Date

Comments Official Use Only:



AUTHORIZATION TO CONFIRM

I understand that should my documentation prove fraudulent the following will occur.

- Immediate withdrawal from the course.
- Appeal documents will be turned over to *Student Judicial Programs*.

I, _____ give permission to *Support Operations for Academic Retention* to verify the authenticity of all documentation submitted with my Appeal of Unexcused Absences Application. My authorization will be in effect only until an Appeal Decision has been made.

Signature

Date

R#

Phone Number

Email Address