



TEXAS TECH UNIVERSITY

Classical & Modern Languages & Literatures

Form for Official Travel / Absence

Note: **This form must be approved and submitted at least ONE WEEK before an absence.**

Name: _____ Date: _____

Course: _____ Section: _____ Day/Time: _____ Substitute: _____

Course: _____ Section: _____ Day/Time: _____ Substitute: _____

Course: _____ Section: _____ Day/Time: _____ Substitute: _____

Period of Leave: From: _____
(Time) (Month/Day/Year)

To: _____
(Time) (Month/Day/Year)

Purpose of Leave: _____

Contact Information during leave: _____
(Telephone number)

(Address)

Contact Information for CMLL Instructional Personnel who have agreed to substitute:

(Attach a list to this form for additional substitution / contact information.)

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

I hereby state that I have contacted the individuals named above and they have agreed to substitute my courses during my absence. I have also provided them with the necessary lesson plans/materials/quizzes, etc. for the days when they will instruct my courses.

Signature of

Applicant: _____ Date: _____

Teaching Assistants/GPTI's must obtain approval of the instructional supervisor.

Name of
Supervisor: _____

Signature of
Supervisor _____ Date: _____

Name of
Dept. Chair _____

Signature of
Dept. Chair _____ Date: _____