

## PERMISSION TO BE ABSENT FROM CAMPUS

Graduate students may be granted permission to be absent from campus for up to (but no more than) ten days of academic sessions at a time, excluding holidays and weekends. Time absent from campus must not conflict with the student's academic responsibilities, coursework, research, or teaching, and should be discussed and approved (via this form) in advance with one's advisor, program director and director/primary instructor of any course the student will be enrolled in during the absent time period.

<b>Student Name:</b>	Student email:				
Graduate Program (please che	eck one): CET	☐ PHSOP	PGY1	PGY2	
Indicate if you are funded by your absence from camps:	one of the following a	assistantship pos	itions during t	he time period of	
☐ Graduate Assistant (department funding – GA) ☐ Graduate Research Assistant (grant funded ☐ Scholarship (specify name of scholarship and country of origin):					
Requested dates, reason(s), an	nd contact informatio	n:			
Departure date: Total days absent:	,				
Reason for travel: Travel destination (city, state,	country):				
<b>Emergency Contact Name:</b>	Emergency	Contact Phone:			
<b>Emergency Contact email:</b>					
The undersigned parties certify assistantship (if applicable) and indicated. All parties acknowled this document, remain enrolled procedures, and fees.	may be absent from the lge and agree that the	ne University of Cabove named stud	Georgia for the dent will, at all	time period times specified by	
Major Advisor (N/A for Resident Print/Sign Name:	lents):	Date	:		
Program Director: Print/Sign Name:		Date	:		
<b>Department Chair:</b> Print/Sign Name:		Date	:		
<b>Graduate Coordinator:</b> Print/Sign Name:		Date	:		

International students <u>must</u> contact the Office of Global Engagement for additional travel information and requirements: <u>https://globalengagement.uga.edu/</u>