

# CAPITAL UNIVERSITY ABSENCE NOTICE

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_  Exempt  Non-Exempt

I was/will be absent \_\_\_\_\_  day(s) or  hour(s) on \_\_\_\_\_ (month, day, year)

This time off is classified as:  Vacation  Sick  Personal  Leave without Pay

Other (Please Explain): \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Supervisor's Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

*Please return your completed Absence Notice to Anna Ursu on the 3<sup>rd</sup> floor.*