



This form should be used as an **advance** application to be absent from practice teaching or to report an absence due to illness. In both cases the form should be submitted to the Field Experience Office as soon as possible, along with a copy of appropriate documentation (such as a Doctor's note), if required. A copy will be returned to you for your records and for confirmation that the time has been completed. All missed practicum days **must** be made up. Only the Dean and Associate Dean (Pre-Service) have the authority to waive this policy. For more information about the absence policy, please see the Field Experience Handbook.

Teacher Candidate Name (Last, First): _____

Local Phone Number: _____ Email: _____ @uwindsor.ca

Date(s) of Absence: _____ Total # of days: _____

Placement School: _____

Associate/Mentor Teacher: _____ Advisor: _____

Reason for Absence:

I agree that the personal information contained in this form will be used by the Field Experience Office to determine the approval or non-approval of the absence request.

Teacher Candidate's Signature

Date

Field Experience Office Use Only

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PRIOR APPROVAL GRANTED
**required in cases other than illness*

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APPROVAL DENIED

COMMENTS:

Field Experience Coordinator or Associate Dean (Pre-Service) Signature

Date

*This section is for Associate/Mentor Teacher and Advisor use only. It should be completed **after** the teacher candidate has completed their missed practicum time.*

Make Up Date(s)	Associate/Mentor Teacher Name	School	Associate/Mentor Teacher Signature

Advisor's Signature

Date