

DEPARTMENT OF COMMUNICATION

Away from Teaching Classroom or Office Hours/Substitution Confirmation

1. Teaching Assistants away from your teaching assignments or office hours are responsible for completing this form and putting it in Nancy Street's mailbox.

Your Name _____
(Print Name Here – Sign below)

Class Absent From (Course & Section) _____

On (date) _____

Because

The person who will cover/ covered this class is _____

The arrangements that will be made/were made for the office hours missed were

2. Please complete and obtain signature of COMM graduate student or faculty member who has agreed to cover your Undergraduate course.

I Name (Substitutes name) _____
(Print Name Here – Obtain Signature below)

Will cover/covered (Course and Section) _____

For (instructor's name): _____ On (date) _____

X _____
Teaching Assistant Substituting DATE

X _____
Teaching Assistant Requesting substitute DATE

TA's must complete this form and put it in Nancy Street's mailbox (even if she is not involved in supervising the course). This form shall be filed before the absence unless it is an emergency situation. In the event of an emergency, please complete this form when you return.