



Pregnancy/Childbirth Excused Absence Notification Form

The completed form and any appropriate supporting documentation must be submitted to the instructor as soon as possible once dates of absence are known and supporting documentation is available.

Student Name: _____

Student ID#: _____ Semester: _____

Course: _____

Date(s) of absence: _____

Student Signature _____ Date Submitted _____

Instructor Signature _____ Date Submitted _____

To be completed by instructor

Description of work to be completed: _____

Deadline(s) for completion (please specify exact date(s)): _____
