



Date: August 15, 2016
To: The Faculty
From: Dr. Steven Minkler, Dean of Academic Affairs
Anastasia Pych, Director of Human Resources
Jaime Flores, Division Director - School of Arts & Media, Humanities, and Social Sciences
Dr. Lin Lin, Interim Division Director - School of Allied Health, Business, and STEM

Infrequently, there may be circumstances which prevent you from teaching your scheduled course(s). You must notify the college when this happens, by following these procedures effective with the Fall 2016 semester. In general, there are two types of faculty absences. Procedures are slightly different based on the circumstances and notification requirements.

Unanticipated Absences

1. **As soon as possible:** contact the Division Secretary* to notify the College you will be absent and cannot hold class as scheduled. Leave a voicemail or email message if necessary. You should also contact your students through email or Blackboard, if possible.
2. The Division Secretary* will document the phone call/email on the Class Cancellation Form.
3. The Division Secretary* or Meriden Center staff member will post a copy of the Class Cancellation Form on the door of the classroom.
4. The Division Secretary* will forward the original Class Cancellation Form to the Division Director.
5. **Ideally within 24 hours:** the faculty member must contact their immediate supervisor (Program/Discipline Coordinator or Division Director) to discuss possible options to make up the missed class and/or course content.
6. The faculty member must complete the **Faculty Absence Form** and submit it to their immediate supervisor for review. Since this process anticipates a collegial discussion in Step 5, approval will not be unreasonably withheld.

* From 4:00 - 6:00pm, contact the Administrative Assistant to the Dean of Academic Affairs

Anticipated, but Unavoidable, Absences

1. **As soon as possible:** inform your immediate supervisor (Program/Discipline Coordinator or Division Director) you will be absent and cannot hold class as scheduled
2. Ideally, the faculty member and supervisor should discuss possible options for class coverage (substitute instructor or test proctor), or plans to make up the missed class and/or course content. In authorized cases only, a substitute instructor or test proctor will be compensated in place of the absent faculty member, in a manner consistent with the collective bargaining agreement.
3. The faculty member must complete the **Faculty Absence Form** and submit it to their immediate supervisor (Program/Discipline Coordinator or Division Director); **ideally two weeks in advance of the absence** for review. Since this process anticipates a collegial discussion in Step 2, approval will not be unreasonably withheld.

In all cases, Full-Time Faculty should use accrued time (sick leave, personal leave) when applicable.

Part-Time Faculty do not accrue paid time off, but are expected to meet each scheduled class and complete all assigned responsibilities. This may include providing make-up classes or course content in an alternate manner as approved by a supervisor, when absences do occur.

Part-Time Faculty who cannot meet the terms and conditions of the Notice of Appointment due to excessive absenteeism may not be offered assignments in future semesters.



REQUEST FOR COVERAGE or ALTERNATE ASSIGNMENT DUE TO FACULTY ABSENCE
“Unanticipated Absence” – Submit as soon as possible.
“Anticipated but Unavoidable Absence” – Submit at least two weeks in advance.

Faculty Member Information

Name _____ Phone _____

E-Mail Address _____ Alt. Phone _____

Date of Absence _____ **ONE FORM PER DATE OF ABSENCE**

Please Check One: Unanticipated Absence

Request Make-Up Class/Alternate Assignment

Anticipated but Unavoidable Absence (*NOTE -Vacations are NOT an allowable absence.*)

Request Coverage (Substitute Instructor or Test Proctor)

Request Make-Up Class/Alternate Assignment

Signature _____ Date _____

Course(s) Impacted by Absence

CRN# (ex. 3210)	COURSE (ex. ENG 101)	COURSE TITLE (ex. Composition)	REQUEST FOR COVERAGE OR ALTERNATE ASSIGNMENT Please Describe

Supervisor – Approval or Denial

Please Check One: Approved Denied -- Reason:

Signature _____ Date _____

Program/Discipline Coordinator or Division Director