



Application for Emergency Absence Basic Sciences-Bahamas

[Please print clearly]

Name: _____ **Student ID#** _____
(Last, First, MI) (Nine-digit)

Address: _____
(Street) (Apt. #) (City) (State) (Zip Code)

Telephone No: () _____ **Email Address:** _____

Current Semester Date: May Sept. Jan. **Current Semester #:** 1 2 3 4
(Circle one) (Circle one)

I am applying for an Emergency Absence starting on: _____
(Last day of attendance)

I plan to return to campus on: _____
Date must be before the end of the semester (limited to 1-2 weeks)

Emergency Absences are granted for emergency reasons only (severe illness or major injury to the student or a similar emergency or death in the student's immediate family) and documentation is required of illness, death, etc.

Students who find it necessary to prolong an emergency absence must request a Leave of Absence from the Dean. Please obtain a Leave of Absence form from Student Services. Failure to request a Leave of Absence will result in an administrative withdrawal and the student will need to apply for readmission. In the case of a Leave of Absence following an Emergency Absence, students will not be charged twice for the same semester.

I have read and understand the University regulations regarding Emergency Absences as specified here and in the Student Handbook.

I understand that all students must report to Student Services upon returning to school.

Student's Signature

Date

For Office Use Only

Assistant Dean (Dr. Robinson) _____ **Date:** _____

Associate Dean (Dr. Myers) _____ **Date:** _____

Director of Student Services _____ **Date:** _____

University Registrar _____ **Date:** _____

Date Student Returned to Campus _____

Student's Signature _____ **Date:** _____

Director of Student Services _____ **Date:** _____