

ABSENCE APPROVAL FORM



INTERNATIONAL PROGRAMS
COLORADO STATE UNIVERSITY

NAME: _____ DATE SUBMITTED: _____

NOTE: If you have questions about how leave is calculated and how it is to be used, please see the CSU Faculty/Staff Handbook or the State Classified Personnel Manual for the guidelines that fit your classification.

DATES REQUESTED: _____ through _____ TOTAL HOURS: _____

TYPE OF ABSENCE:

Annual Leave Sick Leave Family Medical Leave Admin Leave*

**Administrative Leave is used for Jury Duty, Bereavement or other official leave.*

DESCRIBE:

APPROVAL: _____ DATE APPROVED: _____
(Authorizing Signature)