

## **Self-Declaration Form for Brief or Temporary Absence**

This self-declaration is in place of a sick note/supporting documentation, as per the Self-Declaration for Brief and Temporary Student Absences Policy. No additional documentation is required.

Studen	t name:
Studen	t number:
Studen	t U of M email address:
Date(s)	of brief absence:
Course	Number:
Instruc	tor:
NOTE	Variation of the Continue of the Continue of
NOTE:	You must complete Section 1 and Section 2:
Section	1: Nature of Extenuating Circumstance
	Health condition or injury
	Compassionate/Personal
	Bereavement
	Participation in University athletic/scholastic event*
	Religious Observance
	Other:
	nts are recommended to consult program or faculty regulations for approved events for excused
absenc	es.
Section	2: Academic Requirements needing consideration
	Attendance/participation marks
	Written assignment
	Quiz/Test
	Mid-term exam
	Group work
	Lab/tutorial/seminar
	Placement/fieldwork/clinical
	Oral presentation
	Final exam
	Other:



## Section 3: Self Declaration of Brief Absence

I am submitting this self-declaration as a request made in good faith for academic consideration, for a maximum of 120 hours, at which point I expect to resume all academic obligations: \_\_\_\_\_ (initial)

I declare that I am unable to complete the above academic requirement due to an extenuating circumstance as outlined in Section 1 which is limiting or will limit my ability to complete academic requirements.

I understand that it is my responsibility to notify my instructor of an absence as soon as possible.

For course work, I understand that it is my responsibility to submit this form as soon as the need is apparent (in accordance with timelines in the course outline and/or Faculty Regulations) but no later than 48 hours after the end of my brief absence, and to follow-up with my instructor(s) about missed academic requirements.

For deferred final exam, I understand it is my responsibility to contact an advisor in my faculty of registration and submit this form within 48 hours of my missed final exam. (in accordance with the Deferred and Supplemental Examination Procedures).

**Note:** If the 48 hour timeframe falls on a weekend/University closure, the form can be submitted by the next business day.

I understand that providing any false or misleading information, or using this form to inappropriately delay or avoid fulfilling academic requirements, constitutes academic misconduct and a breach of academic integrity as outlined in the <u>University of Manitoba Student Discipline By-Law.</u>

Student Signature:	
(Note: submitting this form electronically from a U of M email account will be accepted in lieu of a signature)	
Date:	

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