UND MLS SUMMER PRACTICUM (SP) REQUEST FOR ABSENCE FORM

Deadline to Submit Request: ASAP Up To Tuesday, May 26, 2015

Please complete and submit the “Request for Absence” form via email (mary.coleman@med.und.edu ), fax (701-777-2404), or US mail to the address on this form (Attention to Mary Coleman). Completing this form does not guarantee an excused absence from the course.

After the SP begins, in the case of an emergency you must email or call the appropriate instructor and let them know that you would be unable to attend class that day.

Instructor       Email                        Course
Mary Coleman     mary.coleman@med.und.edu      MLS 472 Preanalytical Skills
Brooke Solberg  brooke.solberg@med.und.edu   MLS 473 Clinical Hemostasis I
                 701-777-2245                          MLS 489 Clinical Body Fluids
Karen Peterson  karen.peterson@med.und.edu   MLS 474 Clinical Urinalysis I
                 701-777-2656                          MLS 487 Clinical Mycology
Ruth Paur        ruth.paur@med.und.edu       MLS 477 Clinical Immunohematology I
                 701-777-2651                          MLS 477L Clinical Immunohematology I Lab
Chris Triske     chris.triske@med.und.edu     MLS 478 Clinical Microbiology I
                 701-777-3575
Robert Porter    robert.porter@med.und.edu    MLS 479 Clinical Hematology I
                 701-777-2647

Name: (print)                      Date: __________________________
Email: __________________________ Daytime Phone: __________________________
Dates you are requesting to be absent during UND MLS Summer Practicum: __________________________
Reason for absence: __________________________

For Instructor’s Use:
Date Received: _____________________ Instructor’s signature: _____________________
Instructions from instructor as to make-up or information missed:

UND MLS Summer Practicum Excused Absence Form (Summer 2015)