BOSTON COLLEGE
MORRISSEY COLLEGE OF ARTS AND SCIENCES

DEAN'S LETTER REQUESTS

Students are reminded that the instructor's attendance policy, as stated in the syllabus, serves as the official procedure for absences. The Associate Deans' office serves as the recipient of necessary documentation and the informant to the instructor. Students are expected to schedule conflicting events, including medical appointments, outside of their scheduled class meeting times. It is the student's responsibility to consult the University academic calendar when making travel plans and class syllabi regarding responsibilities and examination details.

Students encountering absences due to medical, personal or family emergencies should contact their class dean.
Upon verification of a valid emergency, the class dean will contact the student's instructors requesting their consideration of an excused absence. Documentation verifying the situation, including specific dates, may be required, and will be kept on file. When requested and appropriate, the reason for the absence can remain confidential. Accommodation of an excused absence (including extension of deadlines and make-up exams) is at the sole discretion of the instructor and may be subject to the student's prior attendance and academic achievement in the course. Requests to reschedule exams may require additional documentation.
Faculty may contact the Deans' office if requests for absences become excessive and require additional verification.

Generally accepted reasons for excused absence include:
- Death of an immediate family member
- Hospitalization
- Medical issue treated by a recognized medical service provider lasting longer than one week
- Mandated court appearance

The Dean's Office will **not** intervene to excuse absences for the following reasons:
- Travel/vacation/family events
- Extracurricular activities including club sports
- Job interviews or career fairs
- Minor illness or injuries lasting less than one week

STUDENT NAME: _____ *EAGLE ID:* _____

REASON FOR ABSENCE:

_____

_____

_____

DATE(S) OF ABSENCE: _____

Documentation attached: _____ Y _____ N