

Student Declaration of Absence

To be completed by the student

Students who have **missed required term work** because of incapacitating distress or illness should refer to the policies and procedures put in place by the instructor and/or the college. Students may be required to submit this Student Declaration of Absence form.

Students who have **missed a final examination** because of incapacitating distress or illness may apply for a deferred final exam and should refer to the policies and procedures put in place by the instructor and/or the college. **Students must apply for a deferred final examination within three working days of the missed final examination.** Part of the deferral process may require students to submit this Student Declaration of Absence form. For more information on exam regulations, visit <https://students.usask.ca/academics/exams.php>.

Instructors collecting this Student Declaration of Absence form are encouraged to provide a copy to the college office.

Student Contact Information (Please print)

Last Name	First Name	Middle Name	USask Student Number
Address		City	Postal Code
Telephone/Cell	College	USask Email	

Missed Academic Requirement(s)

Course name, number and section	Reason for missed academic requirement(s)
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Date of missed requirement	Type of missed academic requirement	Action taken by instructor	Signature of Instructor or designate

Student Declaration

I certify that I missed the course requirements listed above for the reasons stated. Because of this absence I did not complete the academic requirements of the course listed above. I understand that per Article II.B.g.vii of the Student Academic Misconduct Regulations of the University of Saskatchewan Council, that **"providing false or misleading information with the intent to avoid or delay writing an examination or fulfilling any other academic requirement"** constitutes academic dishonesty. If I am found to have committed this breach of the academic dishonesty rules, a formal allegation of academic dishonesty may be made against me as outlined in Article IV of the policy.

Student's Signature	Date (dd/mm/yyyy)
Instructor (or designate) Signature	Date (dd/mm/yyyy)

Student Wellness Centre

Third floor (Rm. 310) and fourth floor, Place Riel Student Centre ■ 1 Campus Drive ■ University of Saskatchewan ■ Saskatoon, SK S7N 5A3 Canada
Email: student.wellness@usask.ca ■ Website: <https://students.usask.ca/health/centres/wellness-centre.php> ■ Tel: 306-966-5768 ■ Fax: 306-966-5786

Revised: February 2022