**Absence from Campus**  **HHP PPS No. 09.01.01**

**Effective Date: October 7, 2022**

**Next Review Date: October 7, 2027**

**Sr. Reviewer: Department Chair**

**01. STATEMENT OF PURPOSE**

* 1. The purpose of this policy is to provide procedures for faculty who will be absent from campus (regular work location), even if no classes are missed, should notify the department chair in the Department of Health and Human Performance (HHP). This policy is based on [AA/PPS 04.02.02](https://policies.txst.edu/division-policies/academic-affairs/04-01-41.html) and [UPPS 04.04.30](https://policies.txst.edu/university-policies/04-04-30.html)

**02.** **DEFINITIONS**

02.01 Substitute: A person employed by Texas State University may be requested to cover a class to be missed (i.e., should be present in the class during scheduled class meeting).

a. It is required that a Substitute is a person who holds a faculty position at Texas State University.

b. A Substitute is a person whose office resides in Jowers Center or who works regularly in Jowers Center. Such a person is familiar with the layout of the building and knows, generally, how day-to-day operations are carried out.

c. Special consideration may be made by the department chair or program coordinator to approve a Substitute who does not fit categories 02.01.a and 02.01.b above (e g., a professor emeritus, graduate assistant).

02.02 Guest Lecturer: A person who is not employed by Texas State University may be requested to make a class presentation to cover a class that is to be missed.

**03.** **PROCEDURES**

03.01 While procedures for requesting absences and leaves may vary (e. g., sick leave, FMLA), faculty should notify the department chair for all anticipated absences or leaves.

03.02 By university policy, some absences or leave require a longer period of prior notification and some have deadlines for submission of notification or an application. Wherever such a case applies or wherever the policy of the university requires otherwise than stated in this section, the university's policy supersedes and must be followed.

03.03 The anticipated absence is to be reported as follows:

1. An  [*Absence from Campus Reporting Form*](https://gato-docs.its.txstate.edu/jcr:2d3cf57b-45f7-469d-9f2a-1615eb79788c/AbsenceFromCampus-Request.pdf),located on the HHP

website, Faculty and Staff Resources, Forms, shall be completed.

1. If the absence from campus is related to time off with pay for the

purpose of addressing health needs, an Application for Leave Approval Form (located on the HHP website, Faculty and Staff Resources, Faculty Sick Leave) shall be completed.

c. The completed form/forms should be submitted to the program coordinator of the instructor's unit.

d. The program coordinator will sign the form/forms and submit it to the department chair.

e. The chair will keep a record of the instructor's absence. If sick leave is requested, faculty must record sick leave hours in SAP or the department’s Administrative Assistant III may record the faculty’s sick leave in SAP.

**04. ABSENCE FROM CLASS**

04.01 Instructors are expected to meet regularly with classes as scheduled and to inform the program coordinator and department chair when this is not possible.

04.02 Details of procedures for different types of faculty absence or leave may be found in the university's policies (AA.PPS 04.02.02, UPPS 04.04.30) and the faculty handbook.

04.03 The instructor requesting absence is responsible for recruiting an approved Substitute or Guest Lecturer to cover classes to be missed (See Paragraph 1 for definition of "Substitute").

04.04 The instructor requesting absence may seek assistance of the program coordinator and/or chair in finding a Substitute or Guest Lecturer to cover classes that are to be missed.

04.05 A suitable assignment may be given to a class in place of the class meeting.

**Certification Statement**

This HHP PPS has been approved by the reviewers listed below and represents the

HHP Department policy and procedure from the date of the document until superseded.

Voting Faculty Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Approve: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Chair of the HHP Department