

**UNIVERSITY OF MICHIGAN
ECOLOGY AND EVOLUTIONARY BIOLOGY DEPARTMENT
OFF CAMPUS REPORT (FACULTY)**

Date: _____

Name _____

Period of intended absence: from: _____ to: _____

Address and phone number where I can be reached during my absence:

Address: _____ Phone: _____

Reason (If you are participating in a Symposium, presenting a paper, etc. please give details):

During my absence, my teaching obligations will be handled as follows: