



In cases where a student will be absent from academic obligations and/or absent overnight, please complete this Student Absence Request Form and submit it to the Student Life Office at [tislo@bu.edu](mailto:tislo@bu.edu) or in-person at 45 West Street, Lenox, MA 01240. This form is only valid with a parent/guardian signature. After submission, the student will receive a notice of approval in their student mailbox. **CHECK OUT WITH THE STUDENT LIFE OFFICE BEFORE YOU LEAVE, AND CHECK IN WITH THE STUDENT LIFE OFFICE WHEN YOU RETURN. STUDENTS ARE NOT PERMITTED TO MISS ACADEMIC ACTIVITIES OR BE ABSENT OVERNIGHT WITHOUT AN APPROVED STUDENT ABSENCE REQUEST FORM.**

**STUDENT AND TRAVEL INFORMATION**

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_____	_____	_____
First	Last	Cell
_____	_____	_____
Program	Instrument	Dorm and Room Number
_____	_____	_____
Departure Date/Time	Return Date/Time	Mode of Transportation
_____	_____	_____
Travel Destination	Reason for Absence	

**AUTHORIZED TRAVEL COMPANION**

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Please identify who will be picking up and/or driving the student as the Authorized Travel Companion:

_____	_____	_____
First	Last	Cell
_____		
Relationship to Student		

**PARENT/GUARDIAN INFORMATION**

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_____	_____	_____
First	Last	Email
_____	_____	_____
Cell	Home	Work
_____		
Parent/Guardian Signature		

*By signing above, I understand that I am requesting permission for my child to be absent from academic obligations and/or overnight and that this request must be approved by BUTI Administration. If approved, I understand that my child will receive written confirmation of approval in their student mailbox. I understand that I am giving authorization for my child to leave the BUTI campus with the Authorized Travel Companion named above. I understand that I am giving authorization for the Authorized Travel Companion to drive my student. I understand that my child must check out with the Student Life Office at the time of departure, and must check in with the Student Life Office immediately upon return.*

**BUTI USE ONLY**

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<input type="checkbox"/> Online Submission	_____	_____	_____
<input type="checkbox"/> Academic Approval	Check-out Date	Check-out Time	Staff Signature
<input type="checkbox"/> Parental/Guardian Approval	_____	_____	_____
	Check-in Date	Check-in Time	Staff Signature