

**STUDENT REQUEST TO OBSERVE
RELIGIOUS HOLY DAY FORM**

Students should submit this form via email to their instructor as early in the term as possible for the term to which the request applies. A separate form must be submitted for each course.

Students requesting an excused absence to observe a religious holy day during an internship, practicum, clinical, or other experiential learning experience should submit this form to their academic component administrator as early in the term as possible. A request to observe a religious holy day may be denied if the requested absence interferes with patient care.

Academic Component: _____ Course Number/Section/Name: _____
Instructor Name: _____ Date Submitted: _____
Student Name: _____ Phone: _____
E-mail: _____

Texas Woman’s University respects the religious observances of students even though they may conflict with university class meetings, assignments, or examinations. Texas Woman’s University shall excuse a student from classes or other required activities, including examinations, for the observance of a religious holy day, including travel for that purpose. A student whose absence for religious holy day observation is excused shall be treated in accordance with TWU URP 06.160: Excused Absence Policy.

Please identify below the religious holy day(s) for which you are requesting an excused absence. “Religious holy day” means a holy day observed by a religion whose places of worship are exempt from property taxation under Texas Tax Code Section 11.20. Religious Observances.

Please state below the specific date(s) for which you are requesting excused absences within the academic term.

Verification and Accuracy:

I verify that the above information is complete and accurate to the best of my knowledge and I understand that any intentional misrepresentation contained in this request may result in disciplinary action.

Student Signature: _____ Date: _____

FOR INSTRUCTOR USE ONLY

Select one of the following two options:

OPTION #1: Approval of Request

State date(s) of approved excused absences.

Identify any assignments or examinations that the student will miss during their absence.

For each missed assignment or examination listed above, state the time period for the student to complete make-up work or examinations. Instructors and students should refer to TWU URP 06.160: Excused Absence Policy for guidance.

Instructor Signature: _____ Date: _____

OPTION #2: Denial of Request

Specify and provide an explanation of the reason for denial.

Instructor Signature: _____ Date: _____

**Return completed form to the student via email within 5 business days of submission.
Submit a copy to your academic component office. Keep a copy in your files.**

APPEAL: Request for Dean of Students Office Review

Submit to the Dean of Students Office within five (5) business days of the date of notice of final decision.

If the student and instructor disagree about whether the absence is for the observance of a religious holy day, or if they disagree about whether the student has been given a reasonable time to complete any missed assignments or examinations, either the student or the instructor may appeal to the Dean of Students Office. All parties must abide by the decision of that office.

Who is requesting an appeal: _____

What is the nature of the appeal: _____

**The Dean of Students Office will inform both parties of their decision related to this appeal via email.
The Dean of Students Office decision is final.**