



Student Declaration of Absence Due to Illness or Injury

I hereby confirm that my absence from _____ class on the date(s) of _____ was a direct result of my inability to attend due to personal illness or injury.

By signing below, I, (*print name*) _____, verify that the information above is true and that I understand my responsibilities under paragraph 4.2.6 of the Student Code of Conduct.

I understand that a record of this declaration may be kept on file.

I acknowledge that this is not an exemption from any exams, papers, or projects that were missed during the time of my absence. The modification of academic obligations is the prerogative of the deans, directors and/or instructors, depending on the type of request.

Signed _____

Date _____

Student I.D. # _____

Faculty/School _____

Note to instructors: *This document enables students to take responsibility for reporting their own absence due to illness and injury, thus alleviating problems that are associated with current practices around “sick notes”. In many situations of illness or injury, students do not require the care of a health or counselling professional.*

The University encourages students to contact their instructor immediately if they are ill and will miss class. The University also encourages students to stay at home if they have a communicable illness (such as flu-like symptoms) that are manageable at home to prevent further spread of illness to other students, staff or faculty. Use of this form during the final exam period may not be appropriate—students are advised to communicate directly with their instructor if they are sick and unable to write final examinations.

If there is a pattern of ongoing illness that prevents regular classroom attendance, we recommend that the instructor refer the student directly to Health and Wellness or if they wish, provide support to the student by using the Early Alert website.

If you have questions, please contact Health & Wellness at 250-807-9270. Information about a student’s health is confidential and cannot be shared unless the student provides written consent to do so.

If you have specific concerns about the use of this form, please contact the Director of Health and Wellness at 250 807 9270.

Form revised June 2021