

Student Signature: ____

Request for Class Absence

Registered Student Organization Academic Department	☐ Athletic Team☐ Other
Name of group:	
Name of the Arkansas Tech University sponsored event:	
Location of the event:	
Date and time of event, including travel:	
As the advisor I confirm the legitimacy of this eve	nt Please contact me if there are any questions
Advisor Name:	• •
Advisor Signature:	
Advisor Title:	
Advisor Email:	Advisor Phone:
The student must present this form to the instructor 1 week prior to the missed classes.	
To the instructor: I respectfully request that I be allowed to make up the academic work that I will miss due to my participation in the Registered Student Organization, athletic team, or university activity listed above. I understand that I must coordinate with each of my instructors to make up any academic work missed due to my absence.	
Student Name:	

Student Handbook, Article V, Section B, Class Absences; Per the Faculty Handbook under Class Attendance :

Date: / /

"Student will not be penalized by their instructors for class absences that result from participation in officially sanctioned University activities. It is the responsibility of the students to present to the instructors notice and verification of authorized participation in such activities. Individual instructors retain the authority to determine how students in their classes will avoid academic penalties for the resulting absences. "