KENT STATE UNIVERSITY

CLASS ABSENCE AUTHORIZATION FORM

This form is to be used to inform instructors that a student will be absent from classes due to a University sponsored activity or other legitimate reason sponsored by an University official. The activity organizer or sponsor should initiate this form in anticipation of the absence ***prior to*** the first scheduled class or activity that caused the conflict.

STUDENT: Provide a reason for the class absence and complete your contact information. List ALL classes in the grid below that will be impacted by your participation in this approved absence (print additional copies of this form if necessary). Obtain the endorsement of the event sponsor and signature of each instructor. Return the completed form to the sponsor. Supporting documentation (i.e. event schedule, field trip flier, etc.) should be attached to this form as appropriate.

University Sponsored Event (specify):____

Event Dates/Times: ____

Student's Name: ______________________ **KSU ID:** ________________ **TERM:** __________

Student's KSU Email: ____________________**@kent.edu** **Phone #:** ____________________

Dates and times of anticipated absence from course(s): ______________________________

Student's Signature: Print Form and Sign - Handwritten Signature **Date:** ________________

SPONSOR: Complete your contact information below. By signing this form, you endorse that the student named above will be absent from class(es) on the specified days and times in order to participate in a University sponsored event.

Sponsor's Name: ______________________ **Title/Dept. or Unit.:**______________________

Sponsor's KSU Email: ____________________**@kent.edu** **Phone #:** ____________________

Sponsor's Signature: Print Form and Sign - Handwritten Signature **Date:** ________________

INSTRUCTOR: The student named above has opted to participate in an approved University activity or event. Pursuant to the ***Class Attendance and Class Absence Policy 3-01.2***, please inform the student about assignments to be made during the absences, and make alternative suggestions for acquisition of the material missed. Provide reasonable opportunity for a makeup examination and/or assignment if the absence occurs on an examination day and/or a day when an assignment is due. In the extraordinary circumstance where it is not feasible to offer a makeup examination and/or assignment, some acceptable alternative must be provided.

CRN	Dept.	Course #	Course Title	Class Time/Days	Instructor Signature	Date signed
					Handwritten Signature is Required	

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Note: The complete ***Class Attendance and Class Absence*** policy can be found in the **KSU Policy Register 3-01.2:**
http://www.kent.edu/policyreg/policydetails.cfm?customel_datapageid_1976529=2037744.