



SCHOOL OF HEALTH AND KINESIOLOGY

Class Absence Form

Name

Date

Define Absence (i.e. Convention, Surgery, etc.)

Date and Time of Departure

Date and Time of Return

Class Missed, Time, Day, Date, Room #, Plans for Course Coverage (Include all courses.)(e.g. PE 1800-001, 8-8:50am, Monday, August 22nd, H&K 112, guest speaker *name*)

Approved by: Director/Assistant Director, School of H&K

Office use only
Date: 8-4-16