

**CEDAR CREST COLLEGE**  
**Student Participation in College Sponsored Events**

This form is designed to assist students in talking with faculty at the beginning of the semester regarding an absence for any college sponsored event. Students should understand that at the time of absence they should be making sufficient academic progress within the class.

The student understands that it is her responsibility to notify the faculty of any change in the scheduling of an event.

Student's Name \_\_\_\_\_ Event \_\_\_\_\_

Faculty Member \_\_\_\_\_ Course name/# \_\_\_\_\_

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Event Date/Time

Make-up Assignment and Due Date

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Sponsoring Faculty/Director signature \_\_\_\_\_ Date \_\_\_\_\_

Student signature \_\_\_\_\_ Date \_\_\_\_\_

Faculty signature \_\_\_\_\_ Date \_\_\_\_\_