



Stephen F. Austin State University
 Sport Club Program
 Class Excuse Request

Club: _____

Date Submitted: _____

Name: _____

Office: _____

Name of Event: _____

Date Needed: _____

Dates & Times of Event			
Departure		Return	
Date		Date	
Time	am pm	Time	am pm

Complete this form for any member who will need to miss class during a club event. Any member not included will need to contact the club's representative with their information, then the representative will need to contact the Sport Club Office before the letter is typed. Letters will be typed and signed then placed in the clubs mailbox. Please **PRINT LEGIBLY**.

#	Member's Name	CID #	Amount Needed
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

President's Signature: _____

Date: _____

CO-SC Signature: _____

Date: _____