



General Instructions:			
1. Complete this form (all fields), sign and send	<b>.</b>		
copy or send as an email attachment (pdf <u>or</u>	<u>ly</u> ) to <u>ahmed.elshamy@cnsu.ed</u>	lu / aashna.pillay@cnsu.edu	
2. Attach all necessary supporting documents.			
I. STUDENT INFORMATION:			
Name:	Student ID:	Request date:	
Student Program/Pathway:	Request Term/ Year:		
II. INFORMATION ON THE REQUEST:			
Absence Day requested (if only 1 day):	Absence Period Requested (if more than 1 day):		
	-		
Nature of the Absence:			
Illness or hospitalization	Death of an imn	nediate family member	
Deligious	Professional Sch	ool Exam or Interview	
Religious			
Jury duty or Court subpoena	Personal emerg	gency Other	
Describe (with as much details as possible) the reasons	you are requesting an excused abse	ence:	
Indicate all supporting documents you are attaching to t	his request:		

## **III. APPROVAL AND SIGNATURES:**

Student Signature	Date	_
Course Coordinator Signature	Date	
Director of Program Signature	Date	