CSI Experience Class Release Form

April 1-2, 2020

In order to participate on a team for this event, you will need written permission from the professor of each class you would miss on Wednesday from 6-8pm and Thursday from 8am – 7pm. Please print this form, obtain the necessary signatures, and return to Dr. Gurian (egurian@norwich.edu) no later than 3/30/20 for adequate consideration. **Note:** If you do not have permission to miss a class for this event, you may still participate. Your team will carry on without you while you are in class and you can rejoin them when your class has ended.

Student Name: _____

Class: _____ Time: _____ Approval to miss class: ☐ Yes ☐ No

Professor's Signature: _____ Date: _____

Class: _____ Time: _____ Approval to miss class: ☐ Yes ☐ No

Professor's Signature: _____ Date: _____

Class: _____ Time: _____ Approval to miss class: ☐ Yes ☐ No

Professor's Signature: _____ Date: _____

Class: _____ Time: _____ Approval to miss class: ☐ Yes ☐ No

Professor's Signature: _____ Date: _____

Class: _____ Time: _____ Approval to miss class: ☐ Yes ☐ No

Professor's Signature: _____ Date: _____

Class: _____ Time: _____ Approval to miss class: ☐ Yes ☐ No

Professor's Signature: _____ Date: _____