

## **REGISTRAR'S OFFICE**

1735 Wahnish Way, C.A.S.S. Bldg., Suite #206, Tallahassee, FL 32307 Office: (850) 599-3115 Fax: (850) 561-2428 Email: registrardocs@famu.edu

## NON-DEGREE STUDENT EXCUSE FORM

**NOTE:** Supporting documentation is required with this form.



LAST NAME

EMAIL ADDRESS

FIRST NAME

**CONTACT NUMBER** 

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Course Name (e.g. ENC 1101)		Faculty/Professor Name (Include first and last name)

From:

To:

Date(s) of Absence

**Reason(s) for Absence:** 

Medical (yourself)	Employment Emergency	(*) Note: Immediate
Family Emergency	Military Orders	Family (Mother,
Recognized Religious Holiday	Court Date/Hearing/Jury Duty	Father, Brother, Sister,
*Death/Bereavement Immediate	Grandparents and/or	
Other:	Legal Guardian)	

STUDENT SIGNATURE

DATE

For Office Use ONLY

Reviewed by:\_\_\_\_\_ Date received: \_\_\_\_\_