**CSI Experience Class Release Form**

April 6 & 7, 2025

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 Monday from 8am – 5pm. Please print this form, obtain the necessary signatures, and return to Dr. Ainsworth ([smaass@norwich.edu](mailto:smaass@norwich.edu)) no later than 3/31/25 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: