

**CORPS LAB and/or PROLAB EXCUSAL REQUEST FORM for Fall 2017**

Last Name:  
Date of Request:  
Email:

First Name:  
Company:

**Class that conflicts with Corps Lab:**

Course: \_\_\_\_\_ CRN: \_\_\_\_\_  
Instructor: \_\_\_\_\_  
Day(s) class meets: \_\_\_\_\_ Time class meets: \_\_\_\_\_  
Reason for Conflict: \_\_\_\_\_

Steps taken to resolve conflict: \_\_\_\_\_

**Class that conflicts with ProLab:**

Course: \_\_\_\_\_ CRN: \_\_\_\_\_  
Instructor: \_\_\_\_\_  
Day(s) class meets: \_\_\_\_\_ Time class meets: \_\_\_\_\_  
Reason for Conflict: \_\_\_\_\_

Steps taken to resolve conflict: \_\_\_\_\_

Signature of Academic Advisor: \_\_\_\_\_

If the excusal request is approved, I understand I am responsible for obtaining all general information announced at each Corps Lab and/or ProLab:

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If the excusal is approved, I understand I am required to participate in all other Corps Lab and/or ProLab events scheduled outside of Corps Lab and/or ProLab:

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Corps Lab excusal is: Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Deputy Commandant

ProLab excusal is: Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
LTC Russell

***(Completed form due to 251 Lane Hall no later than Friday, 9/1/17)***