



ACADEMY *of* ART
UNIVERSITY

FOUNDED IN SAN FRANCISCO 1929

CLASS MAKE-UP FORM

Instructions: Submit one form for each class made up. (PLEASE PRINT)

INSTRUCTOR NAME: _____

COURSE NUMBER: _____ SECTION NUMBER: _____ DAY: _____ TIME: _____

COURSE NAME: _____

SEMESTER: _____ YEAR: _____

DATE OF CLASS WHICH WAS MISSED: _____

REASON: _____

DATE OF MAKE-UP CLASS: _____

INSTRUCTOR'S SIGNATURE: _____

DEPARTMENT DIRECTOR'S SIGNATURE: _____

DATE: _____