

CYPRESS COLLEGE HONORS PROGRAM
Alternate Activity Request

Name: _____ ID#: _____

Please substitute the following activity for one of the Honors Program activities scheduled during the _____ semester of the _____ school year.

Description of alternate activity: _____

Date of activity: _____ Time of activity: _____

Location of activity: _____

Justification for substitution: _____



Approved: _____ Denied: _____ Date: _____

Reason for denial: _____

Signature: _____
Honors Program Director