EXCUSES FOR PARTICIPATION OF STUDENTS IN EXTRACURRICULAR ACTIVITIES

Policy

Ponce Health Sciences University (PHSU) supports students' participation in activities outside their educational schools and programs that contribute to their professional development. These activities include attending conventions or specialty meetings, continuing education activities, professional organization meetings, community activities, and voluntary service activities. However, students must be aware that their academic performance remains a priority, and they are expected to meet all the academic requirements of their curriculum. Students must maintain good academic standing to be eligible to request participation in extracurricular activities. These activities require authorization from the Office of Academic Affairs and the corresponding School or Program Department Director/Coordinator.

Procedures to be followed

- Any student interested in participating in an extracurricular activity when the student has scheduled academic activities must request written authorization from the School or Program Department Director/Coordinator by submitting an "Application to Participate in Extracurricular Activities during Academic Periods" (**see Appendix 1 of this policy)**.
- The request must explain the extracurricular activity, its purpose, expected time commitment, and potential student development benefits. The authorization must be requested at least two weeks before initiating the extracurricular activity.
- Students must provide all the evidence available to support the request. The student must abide by the determination of the School or Program Department Director/Coordinator and will accept the responsibility for the material covered and learning activities missed during the absence period.
- Students will be responsible for providing a plan to cover missed activities while participating in the requested extracurricular activity. It will be the responsibility of the School or Program Department Director/Coordinator to evaluate the paperwork submitted by the student and make the recommendation to the VP for Academic Affairs (Ponce/San Juan) or the Assistant VP for Academic Affairs (St. Louis Branch Campus), who will make the final authorization.
- Documents submitted by students must be complete and have all signatures before requesting approval from the Office of Academic Affairs.

Authorization from the Office of Academic Affairs to attend extracurricular activities does not obligate a school or program to make special arrangements or to organize additional activities to substitute for the missed period by excused students. Authorized absences to participate in extracurricular activities will be counted as "excused absences" for the ***Excused Absence Policy for Academic Activities***. Also, it will follow the ***PHSU Attendance*** policy. Attendance is defined as participation in academic activities registered by the faculty. Participation in the courses will be measured based on the involvement in the academic activities included in the syllabus as part of the course requirements.

APPENDIX 1: APPLICATION TO PARTICIPATE IN EXTRACURRICULAR ACTIVITIES DURING ACADEMIC PERIODS

NAME: _____
DATE: _____
SCHOOL/PROGRAM: _____

1. Provide a brief description of the request (Include purpose and expected time commitment. Attach, in pdf format, all supporting documents available to sustain your request).

2. Describe the potential benefits of this activity to your professional development.

3. Provide a plan to remediate the missed academic activities.

STUDENT SIGNATURE: _____ DATE: _____

APPROVED BY SCHOOL/PROGRAM DIRECTOR/COORDINATOR:

COURSE: _____

YES: _____ NO: _____

SIGNATURE: _____

APPROVED BY SCHOOL/PROGRAM DIRECTOR/COORDINATOR:

COURSE: _____

YES: _____ NO: _____

SIGNATURE: _____

APPROVED BY SCHOOL/PROGRAM DIRECTOR/COORDINATOR:

COURSE: _____

YES: _____ NO: _____

SIGNATURE: _____

APPROVED BY SCHOOL/PROGRAM DIRECTOR/COORDINATOR:

COURSE: _____

YES: _____ NO: _____

SIGNATURE: _____

APPROVED BY THE OFFICE OF ACADEMIC AFFAIRS: YES ____ NO ____
SIGNATURE: _____ DATE: _____