

**Jefferson Community College Radiologic Technology Program
Clinic Make-Up Time Attendance Contract**

This form must be filled out with all appropriate signatures and return to the Kim Hayse within 10 days of the clinical absence. The student will receive a copy to return to their CI and or Preceptor.

Name: _____

Date of Clinical Education Absence: _____

Number of hours missed: _____

Reason for Absence: _____

Date(s) and times for make-up as approved by Clinical Preceptor or Instructor:

Clinical Instructor/ Preceptor Signature

Student Signature

Faculty Member Signature

(For faculty use only: excused or unexcused absence)

Comments: _____

- **This is binding contract; failure to comply with the contract will result in an unexcused absence, which will lower the student's final grade by one letter.**
- **Make-up time is at the convenience of the CI/ preceptor, not the student.**