



### Student Absenteeism Justification

Student's Name: \_\_\_\_\_ Badge No.: \_\_\_\_\_

Academic No: \_\_\_\_\_ Course / Batch (                    ) Group : (                    )

Contact No: 1- \_\_\_\_\_ 2- \_\_\_\_\_

E-mail : \_\_\_\_\_

Number of absenteeism days (                    ).

Missed Session
<input type="checkbox"/> Midterm
<input type="checkbox"/> Finals
<input type="checkbox"/> Lectures, labs

No	Day / Date	Course Name	Course Code	Time	Instructor name
1.					

Student Signature \_\_\_\_\_

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ADMINISTRATIVE USE ONLY

Received By :

Name: \_\_\_\_\_

Badge No.: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

APPROVAL		
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	<input type="checkbox"/> Other (specify under comments)

COMMENTS

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Remarked By:

Signature: \_\_\_\_\_