



STUDENT EXCUSE SLIP APPROVAL

PART I: FOR STUDENT USE

Student Name: _____ BN: _____ Student ID No: _____ Year level _____

Reason of Excuse Request: _____

Provide Supporting Documents (please specify): _____

#	Sessions Missed*	Course Name & Code	Date	Time
1				

*Please specify the type of session i.e. Lab, Lecture, ...etc

 Student
 (Name & Signature)

 Date

PART II: STUDENTS AFFAIRS USE

Please specify the Students Absenteeism Percentage in the abovementioned course(s):

#	Course Name & Code	Absenteeism % (per Component)	Total % Absenteeism	Approval of <u>Course Coordinator</u> (Name & Signature)
1				

- Approved
- Disapproved
- Referred to Associate Dean

Comment (if needed): _____

 Students Affairs Coordinator/Manager
 (Name & Signature)

 Date

PART III: ASSOCIATE DEAN APPROVAL

- Approved
- Disapproved,

Comment (if needed): _____

 Associate Dean
 (Name & Signature)

 Date