



Request no. /
Officer
Date / /

CLASS ABSENCE REQUEST FORM

Written at International Education & Administration Unit, Division of Salaya Campus
Date:

Subject: **Request for class absence** in subject(s) offered by Faculty of Science subject(s) offered by another faculty (for MUSC students only)

Dear Dean of Faculty of Science (via Deputy Dean for Education and Student Development)

No. of Enclosure(s) Medical Certificate issued at No. of Medical Certificate.....
 Date of examination: .../.../.....Examining Physician Name:.....
 Phone no.:

Others (please specify)
 I, (Mr./ Miss/ Mrs.)am an undergraduate student at Faculty of Science, Mahidol University.
 Year:Major: Student I.D.

Academic advisor's name:

Student's contact information:
Mobile phone no.:
E-mail:

No. of credits enrolled for semester...../20.....=credits
 Cumulative GPA: Cumulative GPAs have not been reported

I would like to request your approval to take leave of absence from class(s) at International Program, Faculty of Science, Mahidol University as follows:

Subject code	Subject Instructor's name/ Course Coordinator's name	Date of leave	Subject code	Subject Instructor's name/ Course Coordinator's name	Date(s) of leave
SC		.../.../.....			.../.../.....
SC		.../.../.....			.../.../.....
SC		.../.../.....			.../.../.....
SC		.../.../.....			.../.../.....

Reason for class absence requested: Faculty/ University's business (please specify)
 (Student must submit a request for class absence to the SIM office at least 2 weeks before leaving)
 Illness (a Medical Certificated is required)
 Others (please specify)

..... (Requester's signature)
 (.....) (Requester)

PROCESS FLOW	
<p>(1) <input type="checkbox"/> Academic advisor/ <input type="checkbox"/> Chair of the International B.Sc. Program Committee in..... I, (Lect./Asst. Prof./Assoc. Prof./Prof.) am <input type="checkbox"/> an academic advisor / <input type="checkbox"/> a Chair of the International B.Sc. Program Committee. I confirm that the information given in this request form is true and accurate. (<input type="checkbox"/> Academic advisor/ <input type="checkbox"/> Chair of the International Program Committee) Date:/...../.....</p> <p>(2) (Officer) Request form reviewed and checked by the officer <input type="checkbox"/> Document(s) enclosed <input type="checkbox"/> No document(s) enclosed <input type="checkbox"/> Student's request submission before leaving <input type="checkbox"/> Others (please specify).....</p> <p><input type="checkbox"/> In case of MUSC student requesting for a leave of absence from other faculty's classes/ institutes, the officer must make a notification with document enclosure(s) to Course Coordinator/ Instructor.</p>	<p>(3) Dear SC _____'s Course Coordinator/ Instructor, For your perusal and actions (.....) Deputy Dean for Education and Student Development Date/...../.....</p> <p>(4) Dear Deputy Dean for Education and Student Development <input type="checkbox"/> <u>Allows</u> the student to take a leave of absence from class during the specified date. <input type="checkbox"/> <u>Do not allow</u> the student to take a leave of absence from class during the specified date <input type="checkbox"/> Others (please specify)</p> <p>..... (.....) Course Coordinator/ Instructor Date/...../.....</p>