

Office use only

Request no. ....

Received ...../...../.....



**Mahidol University**  
Faculty of Science  
International Program

## REQUEST FORM FOR CLASS ABSENCE

Written at .....

Date: .....

Subject: **Request for class absence**

**Dear Dean of Faculty of Science,**

(via ☐ Deputy Dean for Education ☐ Deputy Dean for Corporate Communication and International Relations

☐ Assistant Dean for International Program ☐ .....

No. of Enclosure(s) ..... ☐ Medical Certificate issued at ..... No. of Medical Certificate .....

☐ Others (please specify) .....

I, (Mr./ Miss) .....am an undergraduate student at Faculty of Science, Mahidol University.

Year: .....Major: .....

Student I.D.

Academic advisor's name: .....

No. of credits enrolled for semester...../20.....= .....credits

Cumulative GPA: ..... ☐ Cumulative GPAs have not been reported

**Student's contact information:**

Mobile phone no.: .....

E-mail: .....

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

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

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

**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)

☐ Illness (a Medical Certificate is required) .....

☐ Others (please specify) .....

..... (Student's signature)

..... (Student name)

### PROCESS FLOW

**(1)** ☐ Academic advisor/ ☐ Director of the International B.Sc. Program in.....  
I, (Lect./Asst. Prof./Assoc. Prof./Prof.) .....  
am ☐ an academic advisor / ☐ a Director of the International B.Sc. Program.  
I confirm that the information given in this request form is true.

☐ Academic advisor/ ☐ Director of the International Program

Date: ...../...../.....

**(2)** (Officer) Request form reviewed and checked by the officer  
☐ Document(s) enclosed ☐ No document(s) enclosed  
☐ Student's request submission before leaving  
☐ Others (please specify) .....

In case of student requesting for a leave of absence from other faculty's classes/ institutions, the officer must make a letter with document enclosure(s) to Course Coordinator/ Instructor.

**(3)** Dear SC\_\_\_\_\_s Course Coordinator/ Instructor,  
For your perusal and actions

.....  
(.....)

- ☐ Deputy Dean for Education  
☐ Deputy Dean for Corporate Communication and International Relations  
☐ Assistant Dean for International Program  
☐ .....

Date ...../...../.....

**(4)** Dear ☐ Deputy Dean for Education

- ☐ Deputy Dean for Corporate Communication and International Relations  
☐ Assistant Dean for International Program  
☐ .....

☐ **Allows** the student to take a leave of absence from class during the specified period.

☐ **Do not allow** the student to take a leave of absence from class during the specified period.

☐ Others (please specify) .....

.....  
(.....)

Course coordinator/ Instructor

Date ...../...../.....