## **Test Day Leave of Absence Form**

Person Acquiring Signature : Phone #:

	Dept./ Year			Student ID		Reason	
1				Name		Phone #	
Date of Absence							Teacher
Year	Mon th	Day	Subject				Signature

Advisor	Head of Department	
Curriculu m Division	Dean of Office of Academic Affairs	

	• If you are not taking the test, the weight will be distributed in the following
	ways.
	□1. If you are sick, your make up test will be deducted by 20%.
Dec	□2. If one of your family members has passed away or you are in the
isio	hospital, your make up exam will count for full credit.
n	□3.If you have to miss both the midterm and the final, your makeup exam
	will be deducted by 20%
	● □ You cannot miss the exam
	Reason:

## Comments:

- 1. Make up exam requirements:
  - (1) You must give prior notice before the test day that you will miss the exam. If you are missing the exam for medical reasons, you must have a note from a doctor °
  - (2) If you are sick, you must submit an application within three days of the test date  $\circ$
  - (3) If you are leaving for university related reasons, you must also have a note or proof of the reason •
- 2. If you receive permission to miss the exam you must turn in this form within three days to the Office of Academic Affairs •
- 3. Make up Exam Year Month Day Building Classroom.