



De La Salle University
Student Affairs
Office of the Dean

Date

To : _____
Department : _____

From : _____
Ms. Fritzie Ian P. De Vera
Dean, Student Affairs

Re : **APPROVED ABSENCE**

Good day!

Pursuant to **Sec. 2.8.1 & Sec. 2.8.3 (Attendance, Undergraduate)** of the Student Handbook which encourage a balanced education for our students, please consider the absence of _____

from your class _____ on _____ as approved absence(s).
(Name)
(Course and Section) (Date and Time)

He/She is _____

(State the reason)

The concerned student certifies that he/she has incurred only _____ non-approved absences in your class. If this number is less than what your records show, kindly disregard this request.

I understand that only the absence is excused and, therefore, the concerned student will be held responsible for all missed assignments, examinations, reports and other requirements in your class.

Your favorable attention is highly appreciated.

Thank you very much.

Recommending Approval:

Requesting Student:

(Please print name and sign)

IMPORTANT

For the student concerned

1. The Office of the Dean of Student Affairs will process this form in one (1) working day i.e. forms submitted Monday morning can be picked up Tuesday morning.
2. The student should pick-up this form himself or herself from the office of the Dean of Student Affairs.