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# **FACULTY ATTENDANCE FORM**

(OUR Form FA-01)

FACULTY NAME	ID NUMBER	DEPARTMENT	COLLEGE

MAKE-UP CLASS (please indicate reason code for absence being made up): OB - Official Business (attach official approval)

PM - Personal Matter

	ABSENCE(S) INCURRED					MAKE	-UP SCHEDULE	
COURSE	SECTION	ROOM	DATE	TIME	REASON	DATE	TIME	ROOM

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	SUSPENDED CLASS	ONLINE MAKE-UP SCHEDULE		
COURSE SECTION DATE		DATE	TIME	

#### **SUBSTITUTION**

	ANTICIPATED ABSENCE(S)					
COURSE	SECTION	ROOM	DATE(S)	TIME	SUBSTITUTE FACULTY	ID NUMBER

### TEMPORARY CHANGE OF ROOM / TIME / VENUE

- RT Room Transfer (Please attach approved room reservation)
- **CT–** Change of Time (Please attach approved room reservation)
- AC- Alternative Class (on campus; please write details below)
- FT Field Trip (off-campus; please attach approved off-campus activity form in accordance with CHED CMO 063 series of 2017)

	ORIGINAL SCHEDULE						NEW SCHEDUL	.E
COURSE	SECTION	ROOM	DATE	TIME	REASON	DATE	TIME	ROOM/ VENUE

#### ADDITIONAL REMARKS FOR REASON OR ALTERNATIVE CLASS

## **REMINDERS**

- 1. Please accomplish this form in two (2) copies—one for OUR and the other as the receiving copy of the department.
- 2. This form must be received at the Enrollment Services Hub, 2<sup>nd</sup> Floor, Henry Sy Sr., Hall at least one (1) working day before the scheduled make-up class, substitution, room/time transfer.
- 3. Make-up classes shall not be scheduled prior to the submission of this form.
- 4. For online make-up (due to class suspension), this form must be submitted up to 3 working days after the university-designated make-up day.

	APPROVAL:	APPROVAL: (for same day submission)
SIGNATURE (FACULTY) / DATE	SIGNATURE (CHAIR) / DATE	SIGNATURE (DEAN) / DATE