**Exam Absence Report For Faculty Members**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **TO** | : | JIC Deputy, Education & Training Affairs | | | |
| **SESSION** | : |  | **DAY/DATE** | : |  |
| **TIME** | : |  | **SEMESTER** | : |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sr. No | Staff Name | | | | | ID. No | Exam Position | | Session | Day | | Date | | | | Deficiency | |
| Absent | Late  (reporting Time) |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  |  | | | | |  |  | |  |  | |  | | | |  |  |
|  | | |  | |  | |  |  | | |  | |  |  |  | | |
| **Test Supervisor** | | | **:** | |  | |  |  | | |  | |  |  | | | |
| Name | | Signature | | |  | Date | | | |
|  | |  | |  | | | | | | | | | | | | | |