**STUDENT ABSENCE REPORT**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SR. No | I.D. No | Student Name | Course | Exam Session | Proctor Name |
| Course Code | Course Title |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Test Supervisor** | **:** | ……………………………………..…..………….. |  | ……………………………………..…..………….. |  | …………………..……………. |
| Name  | Signature  | Date  |
|  |