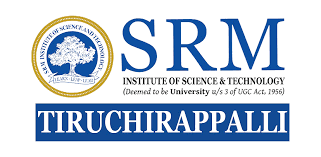
**SRM INSTITUTE OF SCIENCE AND TECHNOLOGY**

*TIRUCHIRAPPALLI CAMPUS*

**NEAR SAMAYAPURAM, TIRUCHIRAPPALLI – 621105**

**------------------------------------------------------------------------------------------------**

**Student Information:**

* **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Roll Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Year/Program/Department/Section** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Semester:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Attendance Percentage**

|  |  |  |
| --- | --- | --- |
| **S.No** | **Name of the Course** | **Attendance Percentage** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Reason for Low Attendance:**

(Please provide a brief explanation for your attendance percentage being below 75%.)

**Undertaking:**

I, the undersigned, acknowledge that my attendance percentage is currently below the required 75% as stipulated by the B.Tech Regulation 2021. I understand that this may impact my eligibility for examinations and other academic activities. In light of this, I undertake the following commitments:

1. I acknowledge my understanding of the attendance policy and the consequences of maintaining less than 75% attendance.
2. I am committed to improving my attendance in the upcoming days.
3. I abide by the regulations of the university examinations

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**Student Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_