|  |
| --- |
| De La Salle University  Student Affairs  *Office of the Dean* |

**APPROVED ABSENCE FORM**

|  |
| --- |
| **NOTE TO THE STUDENTS:**  1. Complete the fillable form below including the number of your non-approved absence. Make sure that all the information given in this form are true and accurate. Write the full name and title of the faculty and his/her corresponding department.  2. Be reminded that the Office of the Dean of Student Affairs requires one day processing.  3. Make a digital copy (scanned or photo) of your approved absence form and email it to your teacher/s concerned as soon as it has been approved and released to you by the DSA.  4. Submit to your teachers the hard copy of the form before the date of your approved absence. Late submission of both the digital and hard copy is not permitted.  5. Be responsible for all assignments and the entire content of the course missed.  6. Be courteous enough to communicate with your teacher of your upcoming approved absences and why even before submitting the approved absence form.  **NOTE TO THE FACULTY:**  1. Kindly consider the absence(s) of the student concerned as approved absence in your class.  2. Please be reminded not to count a missed examination/quiz/ other requirements against the student and to give a make-up for missed exam/ quizzes/ other requirements to the student.  3. However, please verify if the number of the non-approved absences is accurate. If the number provided by the student is less than what your records show, please consider this request for approval null and void.  4. The students are asked to email you a digital copy of this approved absence form before the scheduled absence. Do not accept late submission of both the soft and hard copies of the approved absences. |

**Date: {Current\_Month} {Current\_Date}, {Current\_Year}**

**To: {Professor\_Name}**

**{Professor\_Department}**

**From: MS. NELCA LEILA VILLARIN**

**DEAN OF STUDENT AFFAIRS**

**Re: Approved Absence**

**Peace be with you!**

**Pursuant to Section 9.8.1 and Section 9.8.3 of the Student Handbook which encourage a balanced education for our students, please consider the absence of {Student\_Name} from your class {Course\_Code} {Section} ({Days} {Time}) on {Event\_Month} {Event\_Date}, {Event\_Year} as an approved absence.**

**{Gender} a member of the {Team} and is assigned in the {Assigned\_Event} to be held on {Event\_Month} {Event\_Date}, {Event\_Year}, {Event\_Day} at the {Event\_Venue}. The call time is {Event\_Calltime}.**

**The student concerned certifies that he has incurred {Absences} non-approved absence/s in your class. If this number is less than what your records show, kindly disregard this request.**

**Your favorable attention is highly appreciated.**

**Requesting Student: Noted by:**

**{Student\_Name} {Notee}**

Student-Athlete, {Team} {Title} {Notee\_Title}, {Team}

**Verified by: Recommending Approval:**

**MS. JANINE R. PELIGRINO MR. EMMANUEL M. CALANOG/MS. JOY L. CENAROSA**

TOURNAMENT COORDINATOR, OFFICE OF SPORTS DEVELOPMENT EXECUTIVE DIRECTOR/DIRECTOR, OFFICE OF SPORTS DEVELOPMENT