



Student Absence Form

Date of Absence:

2025-09-09

Classes requesting to leave:

class

Student's name:

test

WCode:

w215125

Phone Number:

+66901516842

Type of Leave:

Reason for Absence:

asdfsdf

I certify that all information is true

( )

Student

( )

Parent

Teacher's Section

☐ Sit-in in class: \_\_\_\_\_ On date: \_\_\_\_\_

☐ Receive VDO of class: \_\_\_\_\_ From date: \_\_\_\_\_

☐ Receive Assignment

( )

Class Teacher

Notes:

1. Students are allowed absence quota not **exceeding 25%** of the total number of classes they are requesting to leave
2. Some classes do not have video recordings as they are practice sessions or practical exercises. Class management will be at the discretion of the teaching instructor.