

**ABSENCE FROM CLASSES APPROVAL SHEET**

First Name:

Last Name:

Student ID:

Year of study: Degree program:

(Undergraduate/Graduate/Ph.D.)

Major:

CGPA (>3.00):

Vaccination status:

Trip Faculty Supervisor (if applicable):

Period of Trip (please specify dates):

Duration of the Trip (days):

City, country of the Trip:

Trip route (both ways):

Purpose of the Trip:

Source of Funding:

***As an exception, we would like to ask you to either give this student a chance to catch up on missed classes by visiting you during office hours or by sending him the presentations. We will make sure to inform the student that he is still responsible for any assignments, be it home assignment or classroom assignment.***

| **COURSE TITLE** | **INSTRUCTOR NAME** | **SIGNATURE and DATE** |
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Approved by Prof. Gonzalo Hap Hortelano

Dean of the School of Sciences and Humanities

Date and signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_