Certificate of Class Attendance

			At	
	Date	Month		Year
To: Director of the Regis	stration Office			
Subject: Certifying Class	Attendance			
l,			, Student Code	e
wish to register for cour	ses in semester	academic	year	by
\square Late registration	Course Number		Section Number	r
\square Late class adding	Course Number		Section Number	r
\square Changing section	Course Number		Section Number	r
Therefore, I wo	uld like you (instructor)	to certify my	class attendance as	an evidence to file my
request to the university	for further action.			
Please consider	my request.			
Signature				
		()
(F)				
(For instructor)		i	instructor of course	
semester ac				
Grant my permission				
_ ` `	•			
\square has attended the class since \square is able to keep up with the lessons				
needs addition				
☐ Do not grant my peri				
Do not grant my pen	1111331011			
		Signature		
		,)