

Accepted document:
Receiver
Date

Absent Examination Petition Form

My name is (Mr./Ms.)			Student ID	
Najor		Adviso	r Name	
.ddress		Mobile Phone No		
was absent from the Ex	kamination of \square Midterm \square	lacksquare Final in the class of $lacksquare$	Theoretical 🏻 Practical.	
Subject Code	Subject Title	Date	Instructor Name	
nereiore. I would like ti			:+la a++a ala a al ala aa a+/a) a a a:al a.a.	
	o request a resit in an examina	ition on a suitable date	with <u>attached document(s) as evidend</u>	
			with <u>attached document(s) as evidend</u>	
☐ Medical Certificate	☐ Medical Expense Receipt 【	☐ Others:		
☐ Medical Certificate ☐ <i>I hereby give a cons</i>	☐ Medical Expense Receipt 【 sent to the Assessment Unit o	☐ Others:		
☐ Medical Certificate ☐ I hereby give a cons relevant agencies/or	☐ Medical Expense Receipt 【 sent to the Assessment Unit ognizations, both public and	☐ Others: f Dusit Thani College to private, as well as ind	o request/collect my personal data f	
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☐ Medical Certificate ☐ I hereby give a constrelevant agencies/or purpose of verifying evaluation process of	☐ Medical Expense Receipt ☐ sent to the Assessment Unit og ganizations, both public and the evidence attached. This of my petition.	☐ Others: f Dusit Thani College to private, as well as independent is granted to fa	o request/collect my personal data f lividuals who possess such data, for cilitate the Academic Affairs Commit Date Date	
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Remark: Students must submit an exam absence petition form within 5 business days after missing the scheduled examination date.