

Approved Absence Request Form

Application No. _____

1. Personal Info.	College / Department		Student ID No.		Name	
2. Reason for Absence						
3. Period of Absence	From / / to / / (days)					
4. Details of Missed Classes	Course Title	Professor	Date of Absence (MM/DD)	Day (Mon~Fri)	Class Period (1-9)	Course Number
			/			
			/			
			/			
			/			
Approved Reasons for Excused Absence						
Military Service	Students who have been called for mobilization or conscription (submit a call-up notice or official proof of summons)					
Hospitalization	A certificate of hospitalization must be submitted. Hospital visits or medical consultation records alone will not be accepted.					
Official Events	Students participating in official events approved by the President of the University or the head of the University/department					
Death in the Direct Family Member	Death of an immediate family member (submit a death certificate and a family relationship certificate)					
Employment	For prospective graduates who become employed during the semester and consequently miss classes (submit a certificate of employment)					
Job Interview	Submit either a confirmation from the company stating that the applicant attended an interview or a business card containing the interviewer's contact information.					
COVID-19	Unavoidable circumstances related to infectious or communicable disease (e.g. diagnostic testing, hospitalization due to infection, self-quarantine, or staying in a facility without internet access)					
Other Reasons	📅 Student's own wedding (submit a wedding invitation) 📅 Course registration change/add-drop (submit course registration records before and after the change by the end of the third week)					

****Supporting documents must be attached**

Date: ____ / ____ / ____

Submitted by: _____ (Signature)

Contact No.: _____