

Confirmation of Attendance Form

Student Name :

PID# :

Quarter :

Year :

Course (Dept.\Cat.#) :

Call#:

Credit Hrs:

TO THE INSTRUCTOR:

The student indicated above states that he/she either did not attend your class or attended only part of the quarter. ***We need confirmation of the student's attendance to submit an appeal for removal of fees.***

Check the item below which best represents the student's attendance in your class.

Never attended _____

Attended week one _____

Attended week six _____

Attended week two _____

Attended week seven _____

Attended week three _____

Attended week eight _____

Attended week four _____

Attended week nine _____

Attended week five _____

Attended week ten _____

Complete the appropriate category below if you do not keep attendance records.

date of last recorded grade _____

no grades recorded _____

Faculty Name (Print) _____

Faculty Signature _____

Office Location _____

Date _____ Office Phone _____