



MAHARAJA INSTITUTE OF TECHNOLOGY MYSORE

(An Autonomous Institution affiliated to VTU, Belagavi)

BELAWADI, NAGUVANAHALLI POST, SRIRANGAPATNA TALUK, MANDYA-571 477

ATTENDANCE CONDONATION REQUEST FORM

(Category: Medical & Sports)

Part A: Student Details

Student Name:	
Section:	
Roll Number / ID:	
Program & Semester:	
Department:	

Part B: Details of Absence (tick inside the tick box)

Category of Condonation Applied under:	Emergency	Medical ☐		
	Pre-approved	Sports ☐	Cultural ☐	Others ☐
Dates of Absence:	From:	To:		
Total Number of Days:				
Supporting Documents Attached:	[] Medical Certificate [] Sports Certificate [] Other			

Declaration: I hereby declare that the information provided above is true. I understand that if my attendance post-condonation falls below 85%, necessary actions may be taken by the department/Institution .

Signature of Student: _____ Date: _____

Forwarding Authority

(this authority is to verify the submitted documents as against application, authorize them and forward to the approval authority)

Remarks and Recommendation:

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Name and Signature of Forwarding Authority with Date

Medical	Sports	Cultural	Other Events

Part C: For Office Use Only APPROVAL / NON-APPROVAL

Faculty In-Charge:	Documents Verified: [] Yes [] No Remarks: Signature with date: Name:
Head of Department (HoD)/ FY Coordinator:	Approved: [] Yes [] No Signature: _____ Date:

POST APPROVAL CONDONATION ENTRY IN THE ATTENDANCE REGISTERS

Sub Code						
Faculty Signature						

