

(GIST)

# Application for Excused Course Absence

## ■ Applicant Information

- Student No. :
- Name :
- Degree Course :
- Department :
- Cell phone :
- E-mail :

## ■ Course Information

- Course code :
- Course title :
- Instructor name :

## ■ Details of Application

- Period(Date/Time) : from 20 . . . . ~ to 20 . . . .
- Reason for Excused Absence (State in detail)
  - Reason :
    - \* Corona19 vaccination 'Date/Time':
    - \* Corona19 vaccination 'Place(Name/Address)' :
- Attachment : Relevant Documents

The applicant requests approval for excused absence.

20 . . . .

Applicant :

(Seal/Signature)

To Professor