No……
Date…./…../……

College of Hospitality Industry Management, SSRU
Make-Up and Exchange Class Teaching Form*

Lecturer Name :…… ☐Full Time ☐ Part Time

Program:…… Telephone No……..

☐ make up class ☐ exchange class

Reason: ☐ official duty leave ☐ sick leave ☐ personal leave ☐ other…….

Please Specify details and attach any documents:

……

……. as per the details:

☐ Make-up Class

No.	Course Code/Title	Student's Group	No. of Student	Scheduled Class		Make-up Class	
				Date/Time	Room No.	Date/Time	Room No.

☐ Exchange Class

No.	Course Code/Title	Student's Group	No. of Student	Scheduled Class		Exchange Class		
				Date/Time	Room No.	Date/Time	Room No.	Substitute Lecturer

Signature …….
Date…../……./……

For Academic Officer :

☐ I have checked the student's timetable and class on the date and time requested, and the lecturer can make-up or exchange class.
Class room number:……..

☐ I have checked the student's timetable and class on the date and time requested, but the lecture canNOT make-up or exchange class because ……

Signature……. Date…../...…../…....

For Head of Program (Comments and Suggestions)

☐ Approved as requested ☐ Not Approved because ……..

Signature……. Date…../...…../…....

For Deputy Dean for Academic Affairs (Comments and Suggestions)

☐ Approved as requested ☐ Not Approved because ……..

Signature……. Date…../...…../…....

*Remark: Please hand in the request form 3 days in advance.