

**UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG  
FACULTY OF ENGINEERING & THE BUILT ENVIRONMENT**

**MISSED LABS AND TUT FORM**

SURNAME OF STUDENT: ..... INITIALS: ..... MR/MISS/MRS

SCHOOL: ..... SIGNATURE: .....

YEAR OF STUDY:    1    2    3    4                      STUDENT NO: .....

DATE MISSED: .....                      DATE RECEIVED: .....

*\*The above mentioned student has submitted the attached Medical Certificate/Documentation and has informed us that he/she was/will be unable to attend lectures from .....to .....\**

**Please advise the School, if you will miss any tests or examinations during the above mentioned period and whether the tests contributes more than 25% towards the year mark.**

Heads of Department/Schools are requested to inform the relevant lecturers in their department of the absence of the student.

**DEPARTMENT PLEASE TO SIGN AND PASS ON THE NEXT ON THE LIST:**

<b>DEPARTMENT</b>	<b>COURSE (S) CODE</b>	<b>DEPARTMENT SIGNATURE</b>
Biology.....		
Computational and Applied Mathematics.....		
Computer Science.....		
Electrical Eng.....		
Maths.....		
Mech/Aero/Ind.Eng.....		
Physics +Mechanics.....		
Psychology.....		
School of Arts: .....		
Sociology.....		

**Date returned to coordinator:** .....