SAMS (MIMS) Attendance Correction Form

1. Applicant:-
   a. Name & Designation: ____________________________________________
   b. Department: __________________ c. Email: ________________________

2. Attendance Correction:-
   a. Course: _____ b. Semester: ___ c. Subject: _______________________
   d. Instructor’s Name: _____________________________________________
   e. Class held on: _________ f. No of Periods: ______ g. Type: [ ] Theory [ ] Practical
   h. Student’s Name: _______________________________________________
   i. MCS ID: __________________
   j. Attendance: ___________________________________________________
      [ ] Present  [ ] Present  [ ] Present  [ ] Present
      [ ] Absent  [ ] Absent  [ ] Absent  [ ] Absent

Note: Corrections should be made within two (02) weeks time.

Date: _____________

(Applicant’s Signature)

For Instructor Use Only

3. Reason of correction: ____________________________________________
   _________________________________________________________________
   _________________________________________________________________
   _________________________________________________________________

Date: _____________

(Instructor’s Signature)

For Administrative Use

4. Vetting of attendance correction:-
   Trg Offr (__________) (Concerned Dept) [ ] Recommended [ ] Not Recommended
   HoD (__________) (Concerned Dept) [ ] Recommended [ ] Not Recommended
   CI (Engg Wing) [ ] Approved [ ] Disapproved

For MIS Cell Only

5. Correction Processing:-
   (Correction Date) _____________________________________________
   (Corrected By) ________________________________________________
   (Signature) ___________________________________________________

Student & Instructor informed on: ________________________________

Date: ________________

OIC (MIS Cell)