UNIVERSITY OF MALTA
JUNIOR COLLEGE

EXEMPTION FORM ‘B’ (FOR NON-MEDICAL REASONS)

This form should be used by students requesting exemption from attending lectures for a valid reason.

TO BE COMPLETED BY PARENT/GUARDIAN

Permission is requested for my daughter/son..........................................................
Id. no............................. UJC e-mail address................................. @jc.um.edu.mt
who is a First/Second year student to be exempted from attending the College
on ..............................................................................................................................

Reason for absence
................................................................................................................................

................................................................................................................................

Signature of parent/guardian Id.no Tel.no

Please note
- This form together with a photocopy of parent/guardian’s Id. card and supporting evidence to justify request for absence from lectures, should be handed at the Students’ Services office, Room B104, prior to when exemption is required, normally five (5) working days.
- The College administration does not hold itself responsible for any lectures/seminars/tutorials/practicals missed during your absence from the College.
- Any communication from the Students’ Services Office regarding exemption forms is forwarded to you by email. It is therefore your responsibility to check your JC email box daily.
- Students caught forging parent’s signature will be suspended.

..............................................................................................................................
Date College stamp (for office use only)