SA Form 13
Student Affairs

University of Science and Technology of Southern Philippines

Alubijid | Cagayan de Oro | Claveria | Jasaan | Oroquieta | Panaon

Exam Permit Exemption Request Form

TO: CONCERNED PROCTOR/TEACHER

✓Date : ____________________________ Course Subject: ____
✓ID No. : ___________________________ Name of Instructor: ______________________________________
✓Name : ____________________________ Subject Schedule : ____
✓Course/Year & Section : _____________ Room Assignment : _______________________________________

REMARKS/ACTION TAKEN:

Reason(s) for request:
✓ ______________________________________
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This Permit is VALID ONLY UNTIL

APPROVED:

DR. AMPARO V. DINAGSAO
Director, Student Affairs
This University

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