**DAYANANDA SAGAR COLLEGE OF ENGINEERING**

**Approval for the Make-Up Test**

**(To be submitted within 48 hours of the completion of the respective CIE)**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**USN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Semester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Leave Permission for CIE1/CIE2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Leave Permission for the Subject: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Reason:** Medical/Sports/Renowned Competitive Exams/Others (Please Specify)

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Proof Credentials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Note:**

1. Medical Grounds: Proper Case Sheet file with prescription etc has to be provided and not just doctors certificate.
2. Sports: Only those representing College duly signed by Mr.Ashok Kumar, Sports Coordinator, DSCE
3. Competitive Exams: Proof of attendance
4. Others: Relevant proof to be produced with parent’s signature. This facility can be availed only once in a semester. The permission under this heading has to be obtained 48 hours before the respective CIE

**Declaration: I shall abide by the CIE rules and regulations of the College**

**Student Signature**

**Course Instructor (Faculty) Signature**

**Approved By:**

(Vice- Principal-for First/ Second semester Year, HOD of the respective Branch-for higher semester)

**Signature**