

TKM COLLEGE OF ENGINEERING

GOVERNMENT AIDED AND AUTONOMOUS KOLLAM – 691005

Form-E1

CONDONATION REQUEST FOR ATTENDANCE

10					
The He	ad of the Depa	rtment			
TKM S	School of Arch	itecture Design and Planning			
Name o	of Student:				
Roll No.:			Register No.:		
Semester:			Branch :		
Sir/Mac	lam,				
My atte	ndance percenta	age for the course(s) is/are	less than 75%	but more than 60%. To enab	ole me to write the
End Ser	nester Examina	tion, I humbly request you to relax the	e minimum atte	ndance requirement for this	semester. I hereby
attach tl	he required Med	dical Certificate /			
Course	and attendance	ce details			
Si. No.	Course Code	Course Name	Atten dance %	Faculty handling the course	Signature of faculty
Name a	and Signature	of the Student		Name and Signature of	Senior Advisor
				Approved by Head of	the Department

Note: 1. Completed form E1 & Original Medical Certificate to be submitted to Senior Advisor.

^{2.} Scanned Copy of form E1(completed in all respects) and Medical Certificate to be uploaded in Students' portal under condonation tab of Academic Management System.