



VERIFICATION OF LECTURE ATTENDANCE

Information for Students

1. This form is to be used by students who forget to sign in and out during class times.
2. Verification of lecture attendance forms must be submitted within 7 working days of the class. Late applications will **NOT** be considered. Return the completed form to the Administration Office in person or via email to administration@sitcm.edu.au.

Lecturer Verification

To the best of my knowledge and belief, _____ SID: _____
attended the following lecture(s) on the date(s) specified and was actively involved in lecture participation.

Date	Unit Code	Unit Name	Lecturer name

The reason given by the student for non-completion of the Attendance Sheet is:

which I accept and verify as appropriate.

Unit Code	Lecturer name	Lecturer sign off	Date

Office Use Only

Date received:	Attendance record adjusted:	Admin sign off:
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