

NOTIS AMARAN KETIDAKHADIRAN KURSUS KOKURIKULUM

**(UniSZA-PT10-PK01-BR016)**

 SEMESTER......SESI 20....../........

Amaran ketidakhadiran ke kuliah kursus kokurikulum:

NAMA PELAJAR :...................................................................................................................................

NO. MATRIK :......................................................... NO. K/P.............................................................

PROGRAM :...................................................................................................................................

FAKULTI :…………………………………………………………………………………………………………………..

KOD/NAMA KURSUS :...................................................................................................................................

TARIKH :…………………………………………………

ALASAN / SEBAB PENAHANAN:

Ketidakhadiran melebihi 10% tanpa sebab yang boleh diterima atau tanpa mendapat kebenaran terlebih dahulu daripada fasilitator.

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| PERMOHONAN (FASILITATOR) |
| Nama : .............................................................................................................................................................T/Tangan : ................................................................... Tarikh : ..................................................................... |
| SOKONGAN (PENYELARAS AKADEMIK) |
| Permohonan di atas adalah disokong / tidak disokong\*Nama : .............................................................................................................................................................T/Tangan dan Cop : .................................................... Tarikh : ...................................................................... |
| KELULUSAN (PENGARAH PUSAT PEMBANGUNAN HOLISTIK PELAJAR) |
| Permohonan di atas adalah diluluskan / tidak diluluskan \*.Nama : .............................................................................................................................................................T/Tangan dan Cop : .................................................... Tarikh : ....................................................................... |
| \*Salinan Bahagian Pengurusan Akademik\*Salinan Pengarah Pusat Penataran Ilmu\*Salinan Dekan\*Salinan Fasilitator\*Salinan Penjaga |
| Pusat Pembangunan Holistik PelajarUniversiti Sultan Zainal Abidin |