

UNIVERSITY OF KWAZULU-NATAL



Enquiries: Tel Nos:
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ATTENDANCE SHEET (SEPARATE SEATING)

MODULE CODE: MODULE TITLE: PAPER NO:

EXAM DATE: TIME: SCHEDULED TIME:

INDICATE (/) REASON FOR WRITING IN A SEPARATE VENUE

- | | | |
|----|--------------------------|--------------------------------|
| 1. | <input type="checkbox"/> | Exam schedule clash |
| 2. | <input type="checkbox"/> | Extra time granted |
| 3. | <input type="checkbox"/> | Arrived late |
| 4. | <input type="checkbox"/> | Religious Privileges (Sabbath) |
| 5. | <input type="checkbox"/> | Other |

	STUDENT NO	SURNAME & INITIALS	DEGREE	SEAT NO	SIGNATURE
1					
2					
3					
4					
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6					
7					
8					
9					
10					
11					
12					

Total number of signatures

.....
NAME OF INVIGILATOR (PRINT)

.....
SIGNATURE

COLLECTED BY (PRINT NAME):

NO OF SCRIPTS:

SIGNATURE:

DATE COLLECTED: