



**PERMIT TO GIVE EXAMINATION/HOLD CLASS
OUTSIDE OF REGULAR CLASS SCHEDULE**

Course Number:
Semester

Agic 20
1st 2nd

Course Title: Basic Farm Machinery & Mechanization
Academic 2024 - 2025

☐ Lecture

☒ Laboratory

Regular Class Schedule: Monday 10am - 1pm

May I request to ☐ hold exam ☒ conduct class outside of the regular schedule to

(date and time) May 24, 2025 2-5 pm at the (venue) DA-203
for the following reasons:

- ☐ Exam in departmental and students taking the exam belong to different sections.
☒ Regular meeting day has declared a holiday
☐ other (please specify) _____

I hereby certify that the above schedule is agreed upon by all students concerned and not in conflict with any calendared University activity. Students who cannot take the exam/attend the Class due to justifiable reason agreed to make up at a convenient time.

JOANNAH D. GUILARDO
Signature over Printed Name of Faculty

Recommending Approval:

LUZ G. ASIO
Department Head

Noted:

CHRISTINA A. GABRILLO
Director, SAS

Approved:

SUZETTE P. LINA
College Dean

Date: _____

Date: _____

Date: _____

to be accomplished after the examination/class was conducted

CERTIFICATION

This is to certify that the above examination/make-up class was conducted on:

☐ date(s), time, and venue stated above

☐ Changed schedule: Date: _____ Time: _____
Venue: _____

If changed, state reason(s):

Certified True and Correct:

JOANNAH D. GUILARDO
Name and Signature of Faculty
Date: 5/13/25

LUZ G. ASIO
Name and Signature of Department Head
Date: 5/13/25

* to be accomplished in 3 copies

