



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

Course Number: Agls 20 Course Title: Basic Farm Machineryes & Mechanization  
Semester: 1<sup>st</sup> ☒ 2<sup>nd</sup> Academic Year: 2024 - 2025  
☐ Lecture ☒ Laboratory Regular Class Schedule: Monday 10:00am - 1:00pm

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

(date and time) March 14, 2025 (9-11am) 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) the students requested to move the exam to have enough time to study

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 B. QUILARIS  
Signature over Printed Name of Faculty

Recommending Approval: <u>LUZ G. ASIO</u> Department Head	Noted: <u>CHRISTINA A. GABRILLO</u> Dean of Students	Approved: <u>JOZETTE B. LINA</u> College Dean
Date: <u>3/10/25</u>	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 B. QUILARIS  
Name and Signature of Faculty  
Date: 3/10/25

LUZ G. ASIO  
Name and Signature of Department Head  
Date: 3/10/25

\* to be accomplished in 3 copies

