



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

Course Number:
Semester

Ag 22 20
1st ☒ 2nd

Course Title:

Basic Farm Machinery & Mechanization

Academic

2024 - 2025

Year:

Regular Class Schedule:

Monday 10 am - 1 pm
Wednesday 4 - 7 pm

☐ Lecture

☒ Laboratory

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

(date and time)

May 24, 2025 9-11 am

at the (venue)

DA 207

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 G. GUILARIO

Signature over Printed Name of Faculty

Recommending Approval:

LUZ G. ASIO

Department Head

Noted:

CHRISTINA A. GABRILO

Director, SAS

Approved:

NUZETTE B. 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 G. GUILARIO

Name and Signature of Faculty

Date: 5/16/25

LUZ G. ASIO

Name and Signature of Department Head

Date: 5/16/25

* to be accomplished in 3 copies

