



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

Course Number: AgSci II Course Title: Introduction to Agriculture
Semester: 1st / 2nd Academic Year: 2023 - 2024
☒ Lecture ☐ Laboratory Regular Class Schedule: MTh 1-2:30

May I request to ☒ hold exam ☐ conduct class outside of the regular schedule to
(date and time) 2/25/2024 @ 1-3 PM at the (venue) Department of Agronomy Rm 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) Provide enough time for students to answer the exam.

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.

QUIMSON R. CANETE
Signature over Printed Name of Faculty

| | | |
|---|--|--|
| Recommending Approval: <u>DIONESIO M. BAÑOC</u> Department Head | Noted: <u>CHONA A. DRIT</u> Dean of Students | Approved: <u>VICTOR B. ACIO</u> 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:

QUIMSON R. CANETE
Name and Signature of Faculty
Date: _____

DIONESIO M. BAÑOC
Name and Signature of Department Head
Date: _____

** to be accomplished in 3 copies*

