JAMAL MOHAMED COLLEGE (Autonomous)

TIRUCHIRAPPALLI – 620 020

APPLICATION FOR GRANT OF CONDONATION

(Only those candidates who fall short of attendance from **26% to 50%** of the working days need to use this form)

Name of the Candidate : Register No:

Course & Subject : Year / Semester:

Total No. of days / hours  
the College Worked :

No. of days / hours the  
Candidate attended :

Actual shortage of attendance :

Category :  
(i) 26% to 35%  
(ii) 36% to 50%  
Reason for shortage of attendance  
(Relevant authentic evidence   
should be enclosed)

Condonation Fee **Signature of the Candidate**

Sanction by the Principal in the   
case of category (i) SPECIFIC RECOMMENDATION   
of the Registration of attendance in the case of  
category (ii) (The Principal should certify to  
the genuinity of the reason for absence)

**Registrar of Attendance Signature of the Principal**

**FOR CONTROLLER OF EXAMINATIONS JAMAL MOHAMED COLLEGE   
 OFFICE USE ONLY**

Remarks of the Section

**Section Head Order of the Controller   
 of Examination**