**ATTENDANCE RECORD REQUEST FORM**

(All Transfer applicants will need to submit attendance information form their past school term or terms.)

**Applicants for transfer must complete and sign Part A.**

**Part B must be completed by an officer at your most recent school. Your school officer should return it to CESL by fax (618-453-6527) or it may be e-mailed to CESL@SIU.EDU).**

**PART A.**

Name of student:       (Family or last name)       (First name)       (Middle name)

Signature of student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Today’s date:

**PART B. (To be completed by an officer at your current or most recent school)**

Number of weeks per study term:

Number of hours of class per week:

Total number hours of absence last term:

Name of school officer / Title:

E-mail address of officer:

Signature of officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School address:

School Phone number

School Fax number:

Date: