



**CIPRIANI COLLEGE OF LABOUR & CO-OPERATIVE STUDIES**

**EXAMINATION CLASH FORM**

**NOTE:**

- Clashes reported after the release of the draft timetable will be addressed and reflected in the final timetable.
- Clashes reported after the release of the final timetable will result in the sequestering of students. These students will be communicated with via e-mail respectively.

**SECTION A - PERSONAL DETAILS**

NAME	STUDENT I.D. #	E-MAIL ADDRESS	CONTACT #

**SECTION B - EXAMINATION CLASH INFORMATION**

*Provide the necessary information under the clash category that pertains to you.*

**CATEGORY 1 - Having TWO (2) examinations scheduled at the same date and time**

COURSE CODE	COURSE TITLE	SCHEDULED DATE	SCHEDULED TIME
1.			
2.			

**CATEGORY 2 - Having THREE (3) or more examinations scheduled on one day**

COURSE CODE	COURSE TITLE	SCHEDULED DATE	SCHEDULED TIME
1.			
2.			
3.			

**CATEGORY 3 - Travelling - Owing to work obligations, will be out of the country during the examination period**

*Note: For this section please attach the necessary documents from your workplace for verification. Failure to attach the above will result in an unprocessed form. Once this is done you will be communicated with via e-mail respectively.*

DATE LEAVING THE COUNTRY	DATE OF RETURN	COURSES AFFECTED (please write the course code and title for each course)

**DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

**Remarks:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**College Official Signature:** \_\_\_\_\_