**Proctoring Exemption Form**

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| **DEPTARTMENT:** |  | **SEMESTER:** |  |

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| **Sr. #** | **Name** | **I.D. #** | **Position** | **Exempted from all Exam Session** | **Exempted From the following sessions only** | **Special Program or any other Comments** |
| **Session #** | **Day & Date** |
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| **Chairman/ ELC Director:** |  |  |   |
| **Signature** |  | **Date** |