

FORMAT-A

Place:

Date

From

To

The HOD,
Department of.....
SRM Valliammai Engineering College,
SRM Nagar, Katankulathur-603203.

Through: The Class Coordinator

Sir/Madam,

I come to know that my ward has not attended the college from _____ to _____ without permission.

The Medical Certificate & Fitness Certificate is Attached / Not Attached.

Further, I have suitably advised my ward in this regard. He / She will be regular in attending the classes in future. I will ensure the same by contacting the Class Coordinator.

Thanking You,

Yours faithfully,

Signature : Signature :

Name of the Student:..... Name of the Parent :