



University of Edinburgh

Self-certified Statement of Illness/Absence

Part One – to be completed by student

Name of Student (please print)

Signature of Student

Course

Date of absence From: To:

This student reports a minor illness lasting less than 7 days which has prevented him/her meeting a submission deadline for coursework. I support his/her request for an extension

Part Two – to be completed by Director of Studies

Name of Director of Studies (please print)

Signature Date

Origin of Form - UGSC January 2000



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