

College of Business

Students Attendance Form for the Final Exam for the firstSemester of the Academic Year 1440/1441 AH –Skaka Community College

Course Name		Course Code		Room No.		Section
Day		Date		Building		
Dept.				Lecturer		

No.	Name of the Student	Academic No.	Student's Status	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Total No.	Withdrawn No.	Deprived No.	Absents No.	Attendance No.

Supervisor:

Name:

Signature: