

CARDIFF UNIVERSITY

PRIVATE AND CONFIDENTIAL

**SELF-CERTIFICATE
(previously PERSONAL SICKNESS CERTIFICATE)**

PLEASE USE BLOCK LETTERS

1. PERSONAL DETAILS

Surname: _____

First Name(s): _____

Programme of Study: _____

Year of Study: _____ University Student Number: _____

2. NATURE OF ABSENCE

Please indicate the nature of absence because of illness to which this certificate relates:

- Assessments other than formal written examinations
- Attendance at compulsory classes
- Other absence

Please also specify where appropriate:

- (a) The title(s) of the assessment(s) missed or for which an extension to the submission deadline is sought:

- (b) The title(s) and date(s) of any compulsory classes from which you have been absent:

