SFU STUDENT SERVICES SENATE AND ACADEMIC SERVICES CERTIFICATE OF ILLNESS FOR ACADEMIC CONCESSIONS Or Undergraduate Students Health Care Provider Stamp (clinic name, contact info) SFU Undergraduate students must submit the Certificate of Illness form to instructors when requesting concessions, for class absences, missed assignments, mid-terms and/or final exams (not to be used for the withdrawal of a course). was soon by				
This note confirms that was seen by Student's Name Student Number				
	on	·		
	Health Practitioner's Name Date			
		of the THREE continue holes		
TO BE COMPLETED BY HEALTH CARE PROVIDER: Please fill in ONE of the THREE sections below.				
	At the time of this examination the student has been ill since			
	There is evidence to substantiate this claim and the illness will likely contir	nue for more days.		
1	The illness is expected to be self-limiting and should not impact beyond the The condition may impact the remainder of the semester. (Student to discu			
	Comment (optional):			
Health Practitioner's Signature				
	At the time of this examination the student was not ill, however the student states he/she was ill on			
2		Date(s)		
	Health Practitioner's Signature			
2	This student is/was unable to attend class on	due to a medically related appointment		
3	Health Practitioner's Signature			

PLEASE NOTE THAT, IF THERE IS A CHARGE FOR COMPLETING THIS FORM, THIS IS THE RESPONSIBILITY OF THE STUDENT.

STUDENT STATEMENT

By signing below I, the applicant, consent to the collection and use of personal in	formation about me as noted above. I understand that	
failure to consent may result in rejection of my application for extension/deferral.		

Date

Student Signature

Freedom of Information and Protection of Privacy

The information on this for is collected under the authority of the University Act [RSBC 1996, C.468, s27 (4)(a)], and is related directly to, and needed by the University for, making a decision on your request for extension or deferral. The information will be used only for this purpose. If you have any questions about the collection and use of this information contact your course instructor or departmental advisor. In addition to the personal information collected on this form, the instructor may need to contact your health care professional to discuss your application for extension/deferral. Any additional personal information collected from your health care professional relates specifically to the concessions you require. This information is collected and used for the same purposes as noted above.