CERTIFICATE OF ATTENDANCE

To International Christian University Admissions Center

This is to certify that _____, date of birth _____/_____/_____,
Student's name (English name, if any) Month/Day/Year

attended/has been attending our school for the following period.

Date of entry	/ / (Month/Day/Year)	Grade/Year at the time of entry	
Did that student enroll on the first day of the semester?			☐Yes ☐No

Date of exit	/ / (Month/Day/Year)	Grade/Year at the time of exit	
Was that student enrolled in school until the last day of the semester? *-If the date of graduation is before the last day of the semester, select **Yes**.* *-If the date of withdrawal is before the last day of the semester, select **No**.*			☐Yes ☐No
Exit Status	☐ graduated * ☐ expect to graduate* ☐ withdrew		
Name of the diploma/certificate conferred (to be conferred)	☐US High School Diploma | ☐IB Full Diploma ☐Canada High School Diploma (BC, Ontario, PEI etc.) ☐UK GCE Advanced Level | ☐NZ NCEA Level 3 ☐Others ( )		

Academic Calendar

☐ Semester ☐ Trimester ☐ Quarter ☐ Others ( )

Term/Semester	Starting month – Ending month	Term/Semester	Starting month – Ending month
1st	-	3rd	-
2nd	-	4th	-

eg. April-June, September-November, December-March

Principal/Headmaster: _____
(Printed name)

_____
(Signature)

Official Seal/Stamp

School Name: _____

Address: _____

Name of Contact Person/Position: _____

Email: _____School Website: _____

Date: _____