

Please fill in the blanks.

### CERTIFICATE OF ATTENDANCE

To International Christian University Admissions Center

This is to certify that \_\_\_\_\_, date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_,  
(Student's name) (Month/Day/Year)

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

Date of entry (Month/Day/Year)	/ /	Grade/Year at the time of entry	
Date of exit (Month/Day/Year)	/ /	Grade/Year at the time of exit	
Exit Status	<input type="checkbox"/> graduated * <input type="checkbox"/> expect to graduate* <input type="checkbox"/> withdrew		

\* What is the name of the diploma or certificate received/expected to receive by the applicant?

- IB Diploma     GCE Advanced Level     NCEA Level 3 Certificate
- Others ( \_\_\_\_\_ )  
(ex) Queensland Certificate of Education

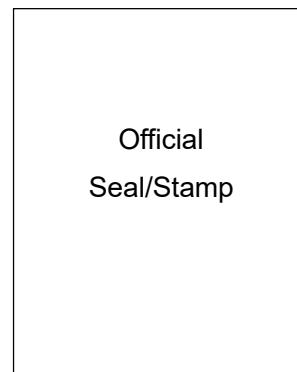
Please tick/fill in the appropriate academic calendar.

<input type="checkbox"/> Semester <input type="checkbox"/> Trimester <input type="checkbox"/> Quarter <input type="checkbox"/> Others ( _____ )	
Starting/ending month of each term	(ex) April – June, September – November, December – March

Date: \_\_\_\_\_

Principal/Headmaster: \_\_\_\_\_  
(Printed name)

\_\_\_\_\_  
(Signature)



Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Name of Contact Person/Position: \_\_\_\_\_

Email: \_\_\_\_\_

School Website: \_\_\_\_\_