Field of study: Medicine, Programme in English

Academic Year: ..... **Year and Semester of Study: .....**

ATTENDANCE AND CLINICAL CLASSES COMPLETION SHEET FOR THE COURSE: .....

(space for stamp and signature)

	SURNAMES AND FIRST NAMES OF STUDENTS FROM GROUP NO.					
DATE OF CLASSES AND INSTRUCTOR'S SIGNATURE	....	....	....	....	....	....
	(attendance / partial grade*) ↓	(attendance / partial grade*) ↓	(attendance / partial grade*) ↓	(attendance / partial grade*) ↓	(attendance / partial grade*) ↓	(attendance / partial grade*) ↓
FINAL GRADE						

* A partial grade is not required if all classes are conducted by one instructor.

NOTE! Entering final grades into the VU system is the responsibility of the teacher.