

**PRAVIN GANDHI COLLEGE OF LAW  
VILE PARLE (WEST), MUMBAI 400 056.**

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**MEDICAL CONDONATION FORM**

Name of the Student: \_\_\_\_\_

\_\_\_\_\_ Yr B.A./LL.B. Div. \_\_\_\_\_ Roll No. \_\_\_\_\_

Mobile No. \_\_\_\_\_

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

To,  
The Principal  
Pravin Gandhi College of Law

Dear Madam,

I could not attend my regular classes from \_\_\_\_\_ to \_\_\_\_\_  
(both days inclusive) on account of the following illness \_\_\_\_\_  
\_\_\_\_\_.

Medical certificate dated \_\_\_\_\_ issued by Dr. \_\_\_\_\_ as  
required by rules is attached.

Yours faithfully,

(Signature of Student)

(Countersign of Parent/Guardian)

**Rules:**

1. Medical condonation will be considered only on the submission of Medical Certificate.
2. Fully completed and signed application form should be given in office during office hours on any working day within THREE DAYS of resuming regular Class.
3. Medical Certificate without specifying the exact dates will not be accepted.
4. The medical certificate submitted does not amount to attending the classes or examination or test. It only explains the medical condition of student.
5. An official receipt will be given by the office on submission of application. The receipt should be preserved by the student.