**Student’s Leave application form**

**NOTES**

1. Students who are unable to attend any class due to valid reasons are required to complete this form and submit it with all supporting documents to the Student Admin Department seven (7) days in advance;
2. Students who are absent due to medical reasons are required to complete this form and submit it together with the medical certificate(s) within three (3) days from the date of absenteeism;
3. Any absence without supporting documents will be considered as absent.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Section A: Personal Particulars** | | | | | | | | |
| Name of Student |  | | | | | | | |
| Student ID |  | | | | | | | |
| Course |  | | | | | | | |
| Leave Applied For | From |  | To | |  | | (Both Dates Inclusive) | |
| Total No. of Days |  | | | | | | | |
| Reason\* | Medical Leave | |  | Home Leave | | | |  |
| Others | |  | | | | | |
| Contact No. During Absence |  | | | | | | | |
| Emergency Contact Person |  | | Contact No. | | |  | | |

\*Please attach supporting documents

|  |  |
| --- | --- |
| **Section B: Applicant’s Declaration** | |
| I understand that if I proceed on leave without being granted approval, my absence will be considered absence without valid reason. | |
|  |  |
| Signature | Date |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section C: For Official Use** | | | | | |
| Received On |  | Received By | |  | |
| Supporting Documents |  | | | | |
| Approved By |  | | Recorded By | |  |
| Signature |  | | Signature | |  |
| Date |  | | Date | |  |