



REGISTRATION DATE: .../...../.....

Ref. No. (REG 11)

Student Leave Application Form

Name :

Student No: Contact no:

Address :

Major :

Semester : Year:

Subjects	Lecturers' Signature
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____

Number of days applied for _____ From _____ (Date) to _____ (Date)

Reason for Leave Applied (please submit relevant supporting document)

Conditions for Leave:
Students are to obtain agreement from each and every one of his/her lecturer concerned prior to getting the leave approval from the head of department/dean of the faculty.
Students are responsible for the timely submission of their assignments and for being present to take their test or quizzes. Under no circumstances can the leave be used as an excuse for late submission of assignments or failing to be present to take tests or quizzes.

Student's Signature: _____

Date:

Head of Department

Dean of Faculty
