Application for Leave of Absence Form

Section A: Student Details	
Student Name:	Student ID:
Address:	
Contact Number:	Email:
Course:	
Course Start Date:	Course End Date:

Section B: Reasons for / Details of Request *(Please attach copies of documentary proof if applicable.)*	
Leave Start Date:	Leave End Date:
Reason for LOA:	
Student Signature:	Date:

Section C: Office Use Only	
Fees Status:	
Document Provided: Medical Certificate ☐ Airline Ticket ☐ Letter from Student ☐ Other Documentation: ……....	
Course Coordinator Notified: ☐ Yes ☐ No	
Staff Name:	Date:

Note: All required documents must be provided within 7 days of submitting this form.