

Student's Leave Application Form

Department of Chemistry
Uka Tarsadia University

Student Name: Enrolment Number:

Course: Semester:

Dates of Leave: From / / to / / Total No. of Days:

Leave taken earlier during the Semester: Days

Reason for Leave: (Please ✓ the appropriate)

☐ Sick Leave ☐ Compassionate Leave ☐ Representing Macau or Dept. Activity
☐ Others (Please specify)

Attachment: ☐ Medical Certificate ☐ Others

Signature of Student: Date: / /

Parent Signature:

For Office Use Only:

☐ Recommended / ☐ Not Recommended ☐ Approve/ ☐ Disapprove

.....
Signature of Class Teacher

Date: / /

.....
Signature of Director

Date: / /

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Leave from the following Classes and Laboratories:

[illegible]

Note: An approved leave will be considered up to 20 % of your absent in one semester, except some serious issue.

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