

# LEAVE APPLICATION

This form is used for students to apply for leave.

LAST NAME	
FIRST NAME	
STUDENT ID	
DATE OF BIRTH	DD/MM/YYYY
COURSE NAME	
COURSE DURATION	DD/MM/YYYY-- DD/MM/YYYY
INTENDED LEAVE DURATION	DD/MM/YYYY-- DD/MM/YYYY

## REASON FOR LEAVE

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IS THIS A LEAVE FOR COMPASSIONATE REASONS? (Please check the right answer)	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
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APPLICANT SIGNATURE:	
DATE:	
LEGAL GUARDIAN SIGNATURE: (if the student is under 18)	
DATE:	