



LOA - T \_\_\_\_ - \_\_\_\_ - 000 \_\_\_\_

**APPLICATION FOR LEAVE OF ABSENCE**

<p><b>IMPORTANT</b></p> <p>Please write in <b>BLOCK LETTERS ONLY</b>.</p> <p>Please provide all information required in this form. Incomplete forms will not be processed.</p>	STUDENT NUMBER		COURSE
	NAME OF STUDENT		
	LAST NAME	FIRST NAME	MIDDLE NAME
	CONTACT NUMBER	EMAIL ADDRESS	

I will not be attending classes / enrolling in the Entrepreneurs School of Asia for \_\_\_\_\_ terms.

<p><b>FROM</b></p> <p>_____</p> <p>TERM / YEAR</p>	<p><b>REASON FOR LEAVE OF ABSENCE</b></p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>TERM 1 - Jan - Mar    TERM 2 - May - Aug</p> <p>TERM 3 - Sep - Dec</p>	

I WILL BE BACK TO RE-ENROLL ON :    TERM \_\_\_\_\_    YEAR \_\_\_\_\_

**ENROLMENT STATUS :**

<input type="checkbox"/> I AM NOT CURRENTLY ENROLLED LAST TERM ENROLLED _____ TERM	<input type="checkbox"/> I AM CURRENTLY ENROLLED TERM ENROLLED _____ TERM	MODULE CODE	REF. NO.	MODULE CODE	REF. NO.
			REF - IDX		REF - IDX
			REF - IDX		REF - IDX
			REF - IDX		REF - IDX
			REF - IDX		REF - IDX

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND ANY ADJUSTMENTS PERTINENT TO MY REQUEST WILL BE SUBJECT TO ADMINISTRATIVE CHARGES WHEN APPLICABLE AND THAT THE APPROVAL / DENIAL OF MY REQUEST IS THE SCHOOL'S PREROGATIVE.

\_\_\_\_\_  
STUDENT'S PRINT NAME AND SIGNATURE                      DATE

RECEIVED BY :	
SERVICE OFFICER ON DUTY	
DATE RECEIVED :	
	SERVICES VALIDATION

**FOR OFFICIAL USE ONLY**

<p>APPROVED BY :</p>    <p>PRINT NAME AND SIGNATURE</p>	REMARKS :
DATE :	

