SSTC INSTITUTE

MM/YY:

STUDENT LEAVE RECORD

Name: _____   Course: _____

| **Type of Leave (Medical)** | **Leave Period** | **Supporting Document** |

☐ Medical Certificate (MC)   _____ to _____   ☐

Note for Medical Leave:
1. All medical leave applications must be accompanied with supporting document, e.g. MC, medical report etc. Incomplete applications will not be accepted and students may be recorded as being absent.
2. Original MCs must be submitted immediately once the student returns to school.
3. Please submit medical leave applications to the Front Desk.

Student's Signature: _____   Date: _____

| **Type of Leave (Non-Medical)** | **Leave Period** | **Supporting Document** |

☐ Home Leave   _____ to _____   ☐

☐ Others,   _____ to _____   ☐

please state reason   _____

Note for Non-Medical Leave:
1. All non-medical applications must be accompanied with supporting document, e.g. 2-way air ticket, parent's letter etc. Incomplete applications will not be accepted and students may be recorded as being absent.
2. All non-medical leave applications are subject to the approval of the Programme Manager (PM). Students who go on leave during school term may be recorded as being absent.
3. All non-medical leave applications should be submitted at least 3 working days in advanced. Late submission will be considered on a case-by-case basis by the PM.
4. Please submit non-medical leave applications to the Front Desk.

(If student is below 18 yrs old)

Student's Signature: _____   Parent/Guardian's Name: _____

Date: _____   Parent/Guardian's Signature: _____

PM Approval:

☐ Approved   ☐ Not Approved   PM Signature and Date: _____

For official use:

Received By:	Received Date:	Acknowledged By: