

Leave of Absence (LOA) Form

F-2.6.1_v7



Section A: Student Details

Name:	Student Number:
Current Address:	
Mobile Number:	Email Address:
College:	Course Name:

Section B: Reasons for / details of request

(Please attach copies of documents that will support your request. It must include one primary document and one secondary document. (See section C for reference).

Leave Start Date:	Leave End Date:
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Reason for LOA:

Student Signature:	Date:
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Parent/Legal Guardian Name (for under 18 students):

Signature:	Date:
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Note: All required documents must be provided within 7 days of submitting this form. Failure to do so may result in your LOA being disapproved.

Section C: Office Use Only

(To be filled out by Student Services Officer)

Fees Status:

<u>Primary Documents:</u> <ul style="list-style-type: none"><input type="checkbox"/> Medical Certificate<input type="checkbox"/> Death Certificate<input type="checkbox"/> Police or Psychologist's Report<input type="checkbox"/> Legal Documents (e.g. subpoena)<input type="checkbox"/> Letter from student explaining compassionate and compelling reasons	<u>Secondary Documents:</u> <ul style="list-style-type: none"><input type="checkbox"/> Airline Ticket<input type="checkbox"/> Medical Prescription<input type="checkbox"/> Other Documentation (specify):
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Course Coordinator Notified: <input type="checkbox"/> Yes <input type="checkbox"/> No

Staff Name:

Staff Signature:	Date:
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