

Please read the following instruction and notes carefully before submitting the application for leave of absence form:

1. This form is to be completed to obtain approval for absence from class.
2. In the event that prior approval cannot be obtained, completed forms must be submitted to Aventis Student Services within 3 working days from date of absence with the supporting documents.
3. (i) Submission of MCs issued by Singapore registered doctors is taken as approval for leave of absence. If approval is not granted, student will be informed of status by School via email.
(ii) For other reasons provided, student's attendance will be considered as present if approval is granted and vice-versa. Student will be informed via email.
4. Please be reminded that in accordance to ICA regulations, all Student's Pass holders:
 - Are required to fulfil a monthly attendance of at least 90%
 - should not fail to attend classes for a continuous period of 7 days or more without any valid reason
5. Full time - non-Student's Pass holders and part time students are required to achieve at least 75% attendance for entire course.

SECTION A : STUDENT DETAILS	
Name of Student	NRIC/FIN/Passport No.
Email	Mobile Phone
Awarding Institution (Please tick accordingly) <input type="checkbox"/> Aventis School of Management <input type="checkbox"/> University of Dubuque <input type="checkbox"/> California State University <input type="checkbox"/> University of West London <input type="checkbox"/> University of Roehampton	
Course Title	
Date of Absence (DD/MM/YYYY) <i>(use comma if it is more than one day)</i>	
Module Name <i>(use comma if it is more than one module affected)</i>	
Reasons for Absence (Please tick accordingly) <input type="checkbox"/> Medical grounds (attach medical certificate) <input type="checkbox"/> Compassionate leave for immediate family members (attach death certificate) <input type="checkbox"/> Official business overseas trip (attach flight ticket/boarding pass and company letter) <input type="checkbox"/> Others (specify reason and attach relevant supporting documents):	
I declare that the information given is true and accurate to the best of my knowledge and I have not willfully misconstrued and/or suppressed any information.	
Signature of Student _____	Date _____
SECTION B : FOR OFFICIAL USE ONLY	
Request for leave of absence is: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved. Attendance will be marked as absent	
Remarks (if applicable): _____	
Approving Officer's Name and Signature _____	Date _____