

**Submission of Medical Leave/Application for Leave of
Absence for Part-time Courses**

NOTE:

1. MC must be submitted within 48 hours from the last day of medical leave. Students are required to bring along Original MC for verification.
2. Application for leave of absence must be submitted at least 2 weeks before the commencement date of such leave applied for.
3. This form is not applicable for students applying for deferment of semestral examinations.

Part A: To be completed by student

Name: _____ Adm No: _____ NRIC: _____

Tel: (Off) _____ (HP/Pager) _____ Email: _____

Course: _____ Subject: _____

Yr of Study: _____ Class/Group (if applicable): _____

Pls tick accordingly (*delete where appropriate)

I wish to apply for MC from class *on/from: _____ *to/and _____

Name of Clinic : _____

Certificate No. : _____ Issued on: _____

I wish to apply for leave of absence for the following date(s):

Reasons (please attach all relevant documents to support your application)

The period of MC/leave of absence coincides with the semestral exams: **Yes/No***

I understand that it is my responsibility to inform my lecturer(s) concerned of my absence and to follow-up with the class work that I have missed.

Signature of Student

Date

Part B: To be completed by PDC

Submission of MC

Processed by: _____
Programme Officer/Signature

Date

Leave of Absence (Non-medical)

Concurred by sponsored company **Yes** **No** **NA**

Recommended / Not Recommended

Programme Officer /Signature

Date

Approved / Not Approved

Manager/Signature

Date

cc: Course Coordinator _____