

TEMASEK DESIGN SCHOOL**APPLICATION FOR LEAVE OF ABSENCE (LOA)
(NON-MEDICAL)**

NOTE : This form must be submitted to DES General Office 1 week before the intended date(s) of Leave of Absence. Wherever possible, supporting documents should be attached together with this form.

PART A : To be completed by student in BLOCK letters

Mr/Miss/Ms : _____ Contact No. : _____

Adm No. : _____ Course / Year : _____

Name of Course Manager : _____

I wish to apply for Leave of Absence on/from _____ to _____

The classes I will miss during this time are as follows :- (Pls indicate by Subject & Lecturer)

The reason for my application is : _____

*I have read and understood the Procedures and Regulations on Leave of Absence.
I also understand that it is my responsibility to inform my Course Manager / Lecturers concerned of my absence, and to catch up on whatever coursework I have missed.*

Signature of Applicant_____
Date**PART B : To be completed by Lecturers & Course Manager** * delete where not applicable

I agree / do not agree (pls state reason) * to the student's application for leave of absence.

Lecturer / _____ **Signature** _____ **Date** _____

I agree / do not agree (pls state reason) * to the student's application for leave of absence.

Lecturer / _____ **Signature** _____ **Date** _____

I agree / do not agree (pls state reason) * to the student's application for leave of absence.

Lecturer / _____ **Signature** _____ **Date** _____

I agree / do not agree (pls state reason) * to the student's application for leave of absence.

Lecturer / _____ **Signature** _____ **Date** _____
-----**Final approval by CM /** _____ **Signature** _____ **Date** _____**Record updated by :** _____ **Signature** _____ **Date** _____

