



To be filled by staff:
Received by: _____
Date: _____

APPLICATION FOR LEAVE

I. PARTICULARS OF STUDENT

Student Name _____ Student No. _____
Contact Phone No. _____ E-mail Address _____

II. INFORMATION OF APPLYING LEAVE

Leave Period: From ____/____/____ to ____/____/____ Reason _____
dd mm yyyy dd mm yyyy

Table with columns: Absence Course Code, Course Title, Teacher, and Period of classes applied for leave (From/To dd/mm/yyyy and hh:mm).

Notes

- 1. Students who are not able to attend classes owing to illness or non-medical reasons must submit Application for Leave to the respective Faculty/Institute and afterwards complete all assignments required. Unauthorized absence will be deemed to be unjustified.
2. 70% 30% " T" Students must have at least 70% of attendance for each course. Absence (including both justified and unjustified) for more than 30% of the total class hours of a course will be marked as "T" in the final grade. In this case, students will not be allowed to take the final examination and thus will have to retake the course in order to get the credits for that course.
3. Students who apply for absence must notify the respective Faculty/Institute in advance by submitting the duly completed Application for Leave pro-forma, together with relevant certification. In unforeseeable situations, students must call the respective Faculty/Institute at the earliest opportunity for approval. The duly completed Application for Leave pro-forma together with relevant certification must be presented to the Faculty/Institute within 2 working days following their return. Absence of 3 days or above should be applied at least 3 working days in advance.
4. Permission for leave of absence will come into effect only after application has been approved by the University. Late applications or those without adequate supporting documents will not be accepted. Any absence that has not yet been approved or unapproved will be deemed to be unjustified.
5. With regard to the Regulations for Leave of Absence, please refer to the sections on "Rules and Regulations for Study" in the latest Student Handbook.
6. The University reserves all rights and privileges in amending and explaining the above mentioned rules and regulations. All matters and disputes will be subject to the final decision of the University.
7. I declare that the information provided in this application form is true and correct; I have also acknowledged and understood the "Macau University of Science and Technology Personal Data Collection Statement".

Student's Signature _____ Date _____

FOR OFFICE USE ONLY

A) Instructor

Approved Not Approved Comments _____

Signature of Instructor _____ Date _____

B) Faculty

Supporting documents attached Yes No Application has been recorded

Approval results Approved Not Approved Comments _____

Student is being notified of the result by e-mail.

Instructor is being notified of the result by e-mail.

Authorized Signature _____ Date _____