



STUDENT LEAVE APPLICATION FORM

Student Name: _____ **Batch/Year:** _____
(In block capital letters)

Regn No: _____ **Email Address:** _____
(Write in complete format)

Contact No: _____ **Total days of absence** _____ **Days**
in Current Semester: _____

Leave Applied: From: _____ **To:** _____ **No. of Days:** _____

Reason: _____

Is the student likely to miss a Test/Exam during leave? (if yes, state subject/date) _____

Detail of Documents/Proof: _____
(if attached)

(Applicant's Sign & Date)

*Note : (1) Approved leave will also be included in overall 25% margin of absence while calculating 75% mandatory attendance.
(2) Short attendance (below 75%) case will not be allowed to appear in End Term Exam and "F" grade will be awarded.
(3) In case an OHT / Exam is missed then "I" or "F" grade shall be awarded after consideration in DBS/FBS meetings.*

Parent Consent:

Date: _____ **(Parent's Signature)** _____

Remarks by Supervisor (PG) / Advisor (UG)

Remarks by Student Coordinator

Date: _____

Date: _____

Recommendations of HoD (PG) / UG Coordinator

Approved / Not Approved

Date: _____

(Dean / Principal)

Certified that Leave has been entered in the attendance record.

Serial No: _____

Date: _____

(Student Coordinator)



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