



LEADING THE WAY
KHAUFAH • AMĀNAH • IQRA' • RAHMATAN UL-ĀLAMĪN



AN INTERNATIONAL AWARD-WINNING INSTITUTION FOR SUSTAINABILITY

KULLIYAH OF SCIENCE

APPLICATION FOR LEAVE FROM LECTURE/ TUTORIAL

Name : _____ Matric. No : _____

Programme : _____ Year: _____

Mahallah : _____

Address : _____

Duration of Leave : _____ Date (From : _____ To: _____)

Contact No : _____

Reason of absence (please state):

(Please attach any relevant document failing which your application will not be entertained)

Have you applied for leave before? **Yes/ No**. If yes, please state the reason and the period granted:

Course/s to be missed during the particular period:

No.	Course Code	Course Title	Section	Name of lecturer	Signature
1.					
2.					
3.					
4.					
5.					
6.					
7.					

.....
Student's Signature

.....
Date

FOR OFFICE USE

RECOMMENDATION: HEAD OF DEPARTMENT

The application for leave is Recommended Not Recommended

Remarks (if any):

Head of Department

Date

RECOMMENDATION: DEPUTY DEAN STUDENT DEVELOPMENT & COMMUNITY ENGAGEMENT

The application for leave is Recommended Not Recommended

Remarks (if any):

Deputy Dean Student Development & Community Engagement

Date

RECOMMENDATION: DEPUTY DEAN ACADEMIC & INTERNATIONALISATION

The application for leave is Recommended Not Recommended

Remarks (if any):

Deputy Dean Academic & Internationalisation

Date

APPROVAL: DEAN

The application for leave is Approved Not Approved

Remarks (if any):

Dean

Date

Cc: All lecturers of affected subjects