

**FORM to be filled by Parents/Guardian**

Name of student \_\_\_\_\_

Name of the contact person \_\_\_\_\_ Relation \_\_\_\_\_

Reason for Leave \_\_\_\_\_

Contact No \_\_\_\_\_

Address and contact no. \_\_\_\_\_

Arrival Date \_\_\_\_/\_\_\_\_/\_\_\_\_ at \_\_\_\_\_ am/pm Departure Date \_\_\_\_/\_\_\_\_/\_\_\_\_ at am/pm.

(Name and Dated Signature)

Parent/Guardian