APPLICATION FORM FOR LEAVE OF ABSENCE

Please complete this form and return it to the school where the application is made.

| (A) Particulars of child | | | |
|--|---------------------|------------------------------------|------------------------------|
| Name: | | Gender : Male / Female* | |
| Nationality: Singapore Citizen / Permanent Resident* | | BC No/NRIC/Entry/Re-Entry Permit*: | |
| Date of Birth: Day Month | Year | | |
| School currently attending in Singapore: | | Level & Stream: | |
| | | Year Attending: | |
| Name of School Overseas (if available): | | Level: | |
| *Please delete accordingly | | | |
| (B) Particulars of Parents | , | | |
| | F | ather | Mother |
| Name: | | | |
| NRIC No/Entry/Re-Entry Permit*: | | | |
| Nationality: | | | |
| Occupation: | | | |
| *Please delete accordingly | | | |
| (C) Contact information | | | |
| Parent's Contact Details (Comp | ulsory) | | |
| Overseas Correspondence Address | S: | | |
| Overseas Tel No: | | Overseas Fax No: | |
| Email Address: | | | |
| Local Contact Details (To be con local address) | mpleted <u>ONLY</u> | if you wish to dir | rect LOA correspondence to a |
| Name of contact person in Singapo | ore: | | |
| Singapore Correspondence Address | ss: | | |
| Singapore Contact No: | | | |
| Email Address of contact person: | | | |

| (D) Application for Leave of Absence from school | |
|---|---|
| Reason for the application (Please attach supporting documents | 5): |
| Overseas Posting / Business / Company related training* | |
| Estimated period of stay overseas is from to | (DDMMYY) |
| Application for this calendar year is for the period from(DI | DMMYY) to |
| Please delete accordingly | |
| E) Dedensées De Desses | |
| E) Declaration By Parent | |
| I accept all the conditions and terms regarding the Leave I understand that I will need to re-apply for my child's L each year for the following year, together with the LOA I understand that all LOA correspondence will be sent to unless otherwise stated and I should inform the school prinformation. | eave of Absence status by November fees. my overseas correspondence address, |
| Name and Signature of Father/Mother* | Date |
| F) For Official Use: | |
| This application is approved/not approved* for the period (n (mth) to (mth) (yr) | nax 12mths in a calendar year): |
| The amount of fees to be paid for period of absence is \$ | |
| | |
| Name and Signature of Principal | Name of school |
| Date: | |

Note:

1. For LOA periods of less than a year, the annual LOA fee should be pro-rated accordingly.

^{*}Please delete accordingly