澳門大學
UNIVERSIDADE DE MACAU
UNIVERSITY OF MACAU

孔子學院
INSTITUTO CONFÚCIO
CONFUCIUS INSTITUTE

LEAVE APPLICATION FORM

Please fill-in all fields and return the completed form with supporting document(s) to the course instructor no later than 7 working days after your absence.

NAME: _____

TEL: _____ **EMAIL:** _____

COURSE: _____

REASON*:
☐ Health Reason
☐ Work Reason
☐ Others:_____

*Please submit appropriate supporting documents, e.g. medical certification, company letter, etc.

SUPPORTING DOCUMENT:
☐ Medical Certification   ☐ Others:_____
☐ Certification Letter from Employer

JUSTIFIABLE ABSENCE DATE: (dd)_____ (mm)____ (yy) ___to (dd)_____ (mm)_____ (yy) ____, total _____day(s)

I declare that all information given in this application form and the attached documents is true and correct to the best of my knowledge. I understand that the UM Confucius Institute reserves the rights to disqualify my application and to annul my privilege to attend classes at any time if any information provided here is proved to be false and ingenuine. I declare I have acknowledge and understand the <Personal Data Collection Statement of the University of Macau> (The University of Macau, in accord to the purpose of providing the related administrative services requested by applicants, requires applicants to fill in this application form and submit to the UM Confucius Institute (below named as "CIUM"). The personal data collected in the form will only be used for the mentioned purpose and may also be transferred within the University and to entities that are in accordance with legal provision or with your prior consent, for the purpose of carrying out the related procedures. The transmission of personal information over the Internet may lack protection and security. There is a risk that your information may be accessed or used by an unauthorized third party. The application will not be proceeded if applicants fail to fill in any of the mandatory fields as required in the application form in accord to the personal-identification and education-related information. To make correction of your personal data held by the University or to apply for related testimonials, students can submit the request to CIUM.)

_____   _____
     Applicant's Signature   Date