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*Education takes you higher*

**Apex College**

**Request for Exceptional Absence of Leave Form**

Please read Apex College’s Student Attendance Policy, especially Section 5, before completing this form. Please ensure that you are able to provide independent supporting evidence with the completed form. Submitting a completed form without accompanying independent supporting evidence will result in your request for exceptional absence of leave being refused.

Please ensure that you complete each section of this form fully and submit it to the Adminstration Officer, who will then refer it with the HND Programme Leader or Vice- Principal and a decision made.

You must discuss the consequences for your studies of taking exceptional leave, if granted, with the HND Programme Leader or Vice-Principal (Academic), especially how you will submit assessed work to stated deadlines for the semester.

If granted exceptional absence of leave you must abide by the conditions set, especially the exact period of absence that you may be granted. If you do not abide exactly to the conditions set when granted exceptional absence of leave you may be withdrawn from your course of studies.

**Section A: Application for Exceptional Absence (to be completed by the**

**student)**

1. **Student personal details**

Name ………………………………………………………………………

Student ID number …………………………. Email address ………………………

Mobile phone number …………………………………………………….

Address during Exceptional leave (if granted)

………………………………………………………………………………..

………………………………………………………………………………..

Phone number during Exceptional leave ……………………………….

1. **Next of kin details**

Name of next of kin ………………………………………………………..

Telephone number ………………………………………………………….

Address ………………………………………………………………………

…………………………………………………………………………………

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1. **Course details**

Course title …………………………………………………………..

Year of study …………………………

Course start date ……………………………… Course end date ………………………

1. **Request for exceptional absence details**

(i) Period of leave: from …………………………… to ………………………………..

(ii) Reason for request ………………………………………………………………………

………………………………………………………………………………………………….

………………………………………………………………………………………………….

…………………………………………………………………………………………………..

…………………………………………………………………………………………………..

(iii) Independent supporting evidence (for example, medical certificate, copy of death certificate)

………………………………………………………………………………………………….

………………………………………………………………………………………………….

………………………………………………………………………………………………….

*Please attach two copies of your independent supporting evidence (applications without supporting independent evidence will not be considered).*

1. **Details of previous approved exceptional absence with reasons**

…………………………………………………………………………………………………..

…………………………………………………………………………………………………..

1. **Student declaration**

I have read Apex College’s Attendance Policy and discussed how to catch up with my studies upon return with the HND Programme Leader. I understand that it is my responsibility to be fully aware of the consequences for my studies and academic progress of taking a period of exceptional absence. I have made plans to catch up with my studies, and complete assessed work to deadlines upon my return from this period of exceptional absence should it be granted.

Signature of student ………………………………………….. Date …………………….

Printed name of student …………………………………………………………………….

**Section B To be completed by the HND Programme Leader**

Comments about the student including academic progress to date, plans for catching up upon return, ability to complete assessed work to stated deadlines, etc.

Signature of Programme Director or Vice Principal…………………………………

Date ………………….

Printed name of Programme Director or Vice Principal ……………………………………

**Section C Information about the student’s history at Apex College**

This section is to be completed by the Administration Officer of Apex College

In determining the request for exceptional leave of absence the following information needs to supplied by the relevant administrative staff of Apex College.

(a) Any past application for exceptional leave of absence Yes/No

If yes, provide comments ……………………………………………………………..

……………………………………………………………………………………………….

………………………………………………………………………………………………

(b) Attendance record Satisfactory Unsatisfactory

If unsatisfactory please comment ………………………………………………………

………………………………………………………………………………………………

……………………………………………………………………………………………….

(c) Payment history Satisfactory Unsatisfactory

If unsatisfactory please comment ………………………………………………………

………………………………………………………………………………………………..

……………………………………………………………………………………………….

**Approved by** Signature ……………………………………. Date …………………..

Print name …………………………………………………………………………………

**Letter produced by** Signature ……………………………... Date …………………..

Print name …………………………………………………………………………………

**Section D Comments and approval/not approval by the HND Programme Leader**

**Approved Not approved**

Reason for the application for exceptional absence *Acceptable/Unacceptable*

Validity of independent supporting evidence *Valid/Invalid*

Comment on the student’s application

Conditions of approval

Exceptional absence from ……………………………. To …………………………..

HND Programme Leader …………………………………….

Date ………………

Printed name of HND Programme Leader ……………………………………

DoQE Revised May 2022

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