

Resident Assistants' Leave Application Form

APPLICATION TYPE (Please <input checked="" type="checkbox"/>)	
<input type="checkbox"/> Personal Leave	<input type="checkbox"/> Official Leave
PARTICULARS OF APPLICANT	
Name	Matriculation Number
Contact information <u>while on leave</u>	
Contact Number	Email
LEAVE DETAILS	
Reasons for Leave _____	
Number of Days _____	
Period of Application	From _____ To _____ (Date/ Time) (Date / Time)
Duty to be covered by	Name _____
Contact (HP)	Email _____
DECLARATION BY APPLICANT	
<ul style="list-style-type: none"> I declare that : <ul style="list-style-type: none"> a) The information submitted complies with eligibility; b) There is no disruption to related functions; I accept that I may be contacted for urgent departmental matters, or may be asked to postpone the leave. I have submitted the required supporting documents. 	
Signature _____	Date _____
FOR OFFICIAL USE ONLY	
SUPPORTED BY RESIDENT FELLOW (RF)	APPROVAL BY DIRECTOR OF STUDENT LIFE (DSL)
Name	Name
Signature	Signature
Date:	Date:

The information contained on this form is processed in accordance with provisions of Personal Data Protection Act. The information will be held on computer for administration record purposes only.

IMPORTANT NOTES

- All personal leave applications must be made in writing to DSL for approval at least 2 weeks before the commencement of the leave period, and supported by the RF.
- All official leave requests should be supported by the relevant academic department and submitted to RF and the DSL at least one month before the start of leave period.