TAK SUN SECONDARY SCHOOL
Guidance, Discipline and Counseling Committee
Student Leave Application Form

Name of Student: ____________________ Class(no.): _________ ( )

Leave Period: From: ____________________ (date) (am / pm)
To: ____________________ (date) (am / pm)

Total number of school days: ________________

Sick Leave[ ] Casual Leave[ ] (put a ‘✓’ in the box provided)

Remarks: (e.g. information about leave) ____________________________________________

Signed by: ________________________________________________________
Parent’s Signature Date

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Acknowledged by: ______________________________________________________
Class Tutor’s Signature Staff Code Date

Remarks: _________________________________________________________________________________

Handled by: ______________(code) Date: __________________________________________

Guidelines for Leave Application:

If a student requests an absence or an early leave, parent/guardian should call the school office at 2317-4339 before the school starts (for the absence in the morning or whole day) or before the lunchtime ends (for the absence in the afternoon).

The student must present to the Class Tutor the Student Leave Application Form on the first day he returns to school.

For absence due to sickness for two days or more, a medical certificate must also be submitted with the written advice of a doctor.

The above regulation must be followed during the special events or activities of the school, such as Athletics Meet, School Picnic, the examination period and the post-examination period. If a student fails to complete the leave application procedures, discipline actions will be given.

Office Use:
Student’s Name: ________________ Class(no.): _________ ( )
Date: ____________________ Time: _________( am / pm )

Chop