



ST. JOAN OF ARC SECONDARY SCHOOL

聖 貞 德 中 學

55 Braemar Hill Road, Hong Kong. 香港北角寶馬山道五十五號

Tel. 電話: 2578 5984 2578 5570 Fax. 傳真: 2578 5725 Website 網 www.sja.edu.hk

**Application for leave of Absence**

To whom it may concern,

My son / My daughter \* would like to apply for leave of absence.

Name of Student : \_\_\_\_\_ Class: \_\_\_\_\_ No.: \_\_\_\_\_

Date of absence: from \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
date month year date month year

Total no. of day(s) : \_\_\_\_\_ (a.m. / p.m. / whole day) \*

Reason(s) of absence: ( Detailed explanation must be provided )

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Signature of Parent/Guidance: \_\_\_\_\_

Date : \_\_\_\_\_

\*Please delete as appropriate.

(Remarks: Students who take sick leave for three days or more or apply for sick leave during uniform test or examination periods must submit a letter of leave and a doctor's certificate.)

The following parts are filled in by the school:

Part A) The student submitted the following document(s):

Application letter  Doctor's certificate

(Sick leave application has to be submitted within 3 days of returning to school and application for leave of absence due to personal reasons has to be submitted 3 days in advance.)

Name of Class Teacher: \_\_\_\_\_ Signature of Class Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

Part B) The application is

approved.  not approved.

Signature of Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Please put a tick (✓) in the appropriate box .