



Student Application of Leave of Absence

To whom it may concern,

My son/ daughter# _____ () in Class _____ would like to apply:

* **Sick Leave** due to _____.

* **Casual Leave** due to _____.

_____.

Date of absence: from _____/_____/_____ to _____/_____/_____

Date Month Year Date Month Year

Total no. of day(s) _____ (a.m./ p.m./ whole day) #

Supportive document is enclosed*

Medical certificate (must be submitted for sick leave more than one day)

Public Examination or Competition certificate _____

No document

Other document: _____

Parent/Guardian's Signature: _____

Parent/ Guardian's Name: _____

Date: _____

Remarks:

1. Please submit the application letter to Class Teacher on the first day when the student returns to school
2. * Please tick the appropriate box
3. # Please delete as appropriate

Class Teacher Signature: _____

Date: _____



學生請假信

敬啟者：

敝子弟_____班_____號學生_____，現向校方申請：

*病假, 原因為: _____

*事假, 原因為: _____

請假日期: 由_____年_____月_____日至_____月_____日止。

共_____天(上午/下午/全日)#

* 隨函附上：

醫生病假證明書(兩天或以上病假，必須附呈註冊醫生病假證明書)

公開考試或比賽證明書 _____

沒有證明書

其他證明文件：_____

此致

何明華會督銀禧中學

家長/監護人簽署：_____

家長/監護人姓名：_____

_____年_____月_____日

備註：

1. 學生應在復課當天把請假信交給班主任

2. * 請在合適方格內打上√號

3. # 請刪去不適用者

班主任簽署: _____

日期: _____