

APPLICATION FOR LEAVE / MEDICAL LEAVE (MC)

Name							Student ID No.						
Course	EE		CE		TE		RE		BE		ME		
Year of Study	Beta		Gamma			Delta		Epsilon					
Email Address/ H/phone no.													

Date of Leave / Medical Leave	Classes Missed				
	Subject Code	Lecture Group	Tutorial Group	Midterm Test	Lab Experiment
Reason For Medical Leave/Leave:					

All medical certificates (MC) must be submitted to FET office within 2 working days (48 hours) after the last date of MC. Any late submission shall not be entertained by the Dean.

Signature

Approved/Not Approved

(Applicant)

Dean

Date:



STUDENT'S COPY

Name: _____ Student ID: _____

Date of Leave / Medical Leave: _____

Approved / Not Approved

Dean
Date: