



[ICT Program]

## Request of Academic Leave form

ICT.RE- 06 : 06.03.2024

Date \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

**Dear** Dean of Faculty of Information and Communication Technology,

My name is (Miss / Mr.) \_\_\_\_\_ Student ID ,

a student of the Bachelor of Science Program in Information and Communication Technology, year of study \_\_\_\_\_,

Mobile Phone \_\_\_\_\_ would like to request the following:

**Leave Request :** I would like to request leave from studying from semester \_\_\_\_\_ academic year \_\_\_\_\_ due to

- being conscripted into or called for military service
- receiving student exchange scholarship or attending a program of which the university endorsed
- being sick and treated; having a medical certificate from a hospital \_\_\_\_\_
- inevitable or urgent event or situation (please specify) \_\_\_\_\_

**Cancellation of Leave Request :** I would like return to study for semester \_\_\_\_\_ academic year \_\_\_\_\_ from taking leave from studying for semester \_\_\_\_\_ academic year \_\_\_\_\_

Signature \_\_\_\_\_

( \_\_\_\_\_ )

### Guardian's Consent

I, (Mrs. / Miss / Mr.) \_\_\_\_\_ a guardian of  
(Miss / Mr.) \_\_\_\_\_ consent to this request.

Signature \_\_\_\_\_

( \_\_\_\_\_ )

Head of the Academic Administration Office	Assistant Dean for Academic Affairs	Dean of Faculty of Information and Communication Technology
<input type="checkbox"/> Approve <input type="checkbox"/> Not approve because _____ _____ Signature _____ ( _____ ) Date ____ / ____ / ____	<input type="checkbox"/> Approve <input type="checkbox"/> Not approve because _____ _____ Signature _____ ( _____ ) Date ____ / ____ / ____	<input type="checkbox"/> Approve <input type="checkbox"/> Not approve because _____ _____ Signature _____ ( _____ ) Date ____ / ____ / ____

