

## APPLICATION FORM FOR LEAVE OF ABSENCE

*Please complete this form and return it to the school where the application is made.*

### (A) Particulars of child

Name:	Gender : Male / Female*
Nationality: Singapore Citizen / Permanent Resident*	BC No/NRIC/Entry/Re-Entry Permit*:
Date of Birth: Day _____ Month _____ Year _____	
School currently attending in Singapore:	Level & Stream:
	Year Attending:
Name of School Overseas (if available):	Level:

*\*Please delete accordingly*

### (B) Particulars of Parents

	Father	Mother
Name:		
NRIC No/Entry/Re-Entry Permit*:		
Nationality:		
Occupation:		

*\*Please delete accordingly*

### (C) Contact information

Parent's Contact Details (Compulsory)	
Overseas Correspondence Address:	
Overseas Tel No:	Overseas Fax No:
Email Address:	
<b>Local Contact Details (To be completed <u>ONLY</u> if you wish to direct LOA correspondence to a local address)</b>	
Name of contact person in Singapore:	
Singapore Correspondence Address:	
Singapore Contact No:	
Email Address of contact person:	

**(D) Application for Leave of Absence from school**

Reason for the application (*Please attach supporting documents*):

Overseas Posting / Business / Company related training\*

Estimated period of stay overseas is from \_\_\_\_\_ to \_\_\_\_\_  
(DDMMYY) (DDMMYY)

Application for this calendar year is for the period from \_\_\_\_\_ to \_\_\_\_\_  
(DDMMYY) (DDMMYY)

*\*Please delete accordingly*

**(E) Declaration By Parent**

1. I accept all the conditions and terms regarding the Leave of Absence Scheme (LOA).
2. I understand that I will need to re-apply for my child's Leave of Absence status by November each year for the following year, together with the LOA fees.
3. I understand that all LOA correspondence will be sent to my overseas correspondence address, unless otherwise stated and I should inform the school promptly of any changes to my contact information.

\_\_\_\_\_  
Name and Signature of Father/Mother\*

\_\_\_\_\_  
Date

**(F) For Official Use:**

This application is approved/not approved\* for the period (max 12mths in a calendar year):  
\_\_\_\_\_ (mth) to \_\_\_\_\_ (mth) \_\_\_\_\_ (yr)

The amount of fees to be paid for period of absence is \$ \_\_\_\_\_

\_\_\_\_\_  
Name and Signature of Principal

\_\_\_\_\_  
Name of school

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

*\*Please delete accordingly*

**Note:**

1. For LOA periods of less than a year, the annual LOA fee should be pro-rated accordingly.