



2019 - 2020

REQUEST FOR ABSENCE

Student Name \_\_\_\_\_

Course Manager \_\_\_\_\_

Date \_\_\_\_\_

I request the following time off from College, by arrangement with the Course Manager, and I understand that it is my responsibility to catch up on any missed work.

Date

Monday	AM	<input type="checkbox"/>	PM	<input type="checkbox"/>	_____
Tuesday	AM	<input type="checkbox"/>	PM	<input type="checkbox"/>	_____
Wednesday	AM	<input type="checkbox"/>	PM	<input type="checkbox"/>	_____
Thursday	AM	<input type="checkbox"/>	PM	<input type="checkbox"/>	_____
Friday	AM	<input type="checkbox"/>	PM	<input type="checkbox"/>	_____

**Due to** (tick all that apply)

- Personal Reasons
- Family Arrangement
- Medical/Dental Appointment
- Holiday (Holiday should not normally be booked in term time)
- Other (please state)

Totalling \_\_\_\_\_ Number of days

Signed \_\_\_\_\_ Student

Signed \_\_\_\_\_ Course Manager