Leave Application

Subject: Request for Leave (Authorized Absences)

To The Principal/Director/Coordinator Trinity International SS & College

Dear Sir/Madam

This is to request you to grant me Leave (Authorized Absences) on _

Though I am aware of the importance of attending school regularly, I shall be grateful if you could kindly sanction leave because of:

Reason for Leave (Authorized Absences) Tick appropriate box				
Other personal r	Scheduled doctor's appointment earance before an official body/Summons reasons in agreement with the Principal or	respective Directors/Co	matters such as med oordinators	lical treatment/cultural ceremonies
Thanking you for yo	ur kind consideration			
Yours sincerely				
Signature		Signature		
Student's Name:		Parent/guardian	's name:	
ID:		Mobile:		
Grade:	Section:			
	For O	official Use Only	7	
Student's Name:		ID:	Grade:	Section:
Date of Leave:		Sanctioned N	ot Sanctioned	
A	Dillibazar Height, PO Box: 26111, Kathma			Director/Coordinator's Signature:
TRINITY	Tel: +977 1 4445955/4445956, Fax: 443786 Email: info@trinity.edu.np, www.trinity.e			
INTERNATIONAL SS & COLLEGE			Edu	ucation for the Future