



**Application for Leave of Absence during School Term**

Name of Student:

Class:

Name of Parent/Guardian:

Contact Number:

Email Address of Parent/ Guardian:

Date of leave from \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Reason for Leave of Absence:**

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**Important to Note (Please read carefully):**

A student can apply for Approved Leave of Absence due to valid reasons, and approval will be given on a case-by-case basis by the Senior Management Team. If the student is absent without approval, the student will be considered as absent without reason.

The School submits the students' attendance to the Singapore Immigration & Checkpoints Authority (ICA) on a quarterly basis, at the end of each academic term. According to the Terms and Conditions of the Student's Pass issued by the ICA, if any student fails to attend classes for a continuous period of 7 days or more without valid reason, and/or have a percentage of attendance less than 90% in any month of the course without valid reason, his Student's Pass may be cancelled. In addition, the School may bar students from taking examinations if they do not fulfil the ICA's minimum requirement for attendance.

The student must have completed:

1. All registered examination papers
2. Checking of all examination papers
3. Meet the year-end promotion criteria\*

\*This applies to applications made for Term 4: the student must be aware of the consequences if year-end promotion criteria is not met. Advancement tests will be administered for students who do not meet the promotion criteria and should students not pass/ not take the advancement tests, they will be retained in the grade level.

The application must be supported by the following documents, where applicable:

1. Student's Medical Certificate
2. COVID-19 Vaccination appointment dates/ letter from clinic
3. Family emergencies – Documents can include letters from hospitals
4. Any other official document which supports the reason for the application.

I understand and acknowledge the information provided and the implications for my child/ ward.

Signature of Parent/ Guardian:

Date:

For Official Use:

Outcome of application: Approved / Not approved

Signature of Principal/ Vice-Principal (P, HS, SD):