

## 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 / NRIC / Entry/Re-Entry Permit No.*:
Date of birth: Day_____Month_____Year _____	
School currently attending in Singapore:	Level & stream:
	Year attending:
Name of school overseas (if available):	Level:

### (B) Particulars of Parents

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

### (C) Contact Information

<b>Parent's Contact Details (Compulsory)</b>	
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)

**(E) Application for Singapore Student Learning Space Account**

Request for access to Student Learning Space (SLS) account:

Yes / No\*

*SLS is an online learning platform which will allow students to keep in touch with the national curriculum.*

**(F) 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

**(G) For Official Use:**

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

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

\_\_\_\_\_  
Name and signature of Principal

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

\_\_\_\_\_  
Date

**Note:** For LOA periods of less than one year, the annual LOA fee should be pro-rated accordingly.

*\*Please delete accordingly*